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Fill in this information to identify your case: United States Bankruptcy Court for the:	UNITED STATES BANKRUPTCY COURT . NORTHERN DISTRICT OF ILLINOIS
Northern District of Illinois	FEB 1 3 2017
Chapter you are filing us Chapter 7 Chapter 11 Chapter 12 Chapter 13	JEFFREY P. ALLSTEADT, CLERK Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: **Identify Yourself About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 1. Your full name Write the name that is on your Sullivan government-issued picture First name First name identification (for example, your driver's license or passport). Middle name Middle name Hollis Bring your picture identification to your meeting Last name Last name with the trustee. Suffix (Sr., Jr., II, III) Suffix (Sr., Jr., II, III) 2. All other names you have used in the last 8 First name First name years Middle name include your married or Middle name maiden names. Last name Last name First name First name Middle name Middle name i ast name Last name xx - xx - 8 0 4 0 3. Only the last 4 digits of XXX your Social Security number or federal Individual Taxpayer 9 xx - xx -_ Identification number (ITIN)

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Debtor 1	Sullivan First Name Middle	Hollis Name Last Name	Case number (if known)
	前回信念などのながなかまままままます。 前回信念などのながなかままままままままままままままままままままままままままままままままままま		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
and E Identi	ousiness names Employer Ification Numbers you have used in	l have not used any business names or EINs.	☐ I have not used any business names or EINs.
the la	st 8 years e trade names and	Business name	Business name
	business as names	Business name	Business name
		EIN	EIN
		EIN	EIN
5. Where	you live	en de la companya del la companya de la companya del la companya de la companya del la	If Debtor 2 lives at a different address:
		367/ School Dr.	
		Number Street	Number Street
		Country Club Hills, II	L0478
		City State ZIP Cod	e City State ZIP Code
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
All in the description of the second		City State ZIP Code	City State ZIP Code
. Why yo	ou are choosing strict to file for	Check one:	Check one:
bankru		Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)
		Annual desiration of the second secon	
			···

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ebtor 1 Sullivan First Name Middle I	Name	Hollis Last Name			Case number (#	known)
Sinkerince-Average Average Ave						
Tell the Court Ab	out Your	Bankruptcy Case	>			
The chapter of the Bankruptcy Code you	Check for Ban	one. (For a brief des kruptcy (Form 2010)	cription of each, see	Not of p	ice Required by 1° page 1 and check t	1 U.S.C. § 342(b) for Individuals Filing
are choosing to file under	_	apter 7				
	☐ Ch	apter 11				
	☐ Cha	apter 12				
	☐ Chá	apter 13				
How you will pay the fee	Ioca you sub with I ne App I ree By I less pay	al court for more derself, you may pay mitting your paym a pre-printed add ed to pay the fee dication for Individuals that my fee aw, a judge may, I than 150% of the the fee in installm	etails about how your with cash, cashier ent on your behalf, lress. in installments. If wals to Pay The Fill be waived (You mount is not required to official poverty lines.)	ou r's cyo	may pay. Typical check, or money ur attorney may bu choose this op Fee in Installmed request this opt waive your fee, at applies to you his option, you m	eck with the clerk's office in your are paying the fee order. If your attorney is pay with a credit card or check official, sign and attach the ents (Official Form 103A). Ition only if you are filing for Chapter 7, and may do so only if your income is in family size and you are unable to east fill out the Application to Have the
Have you filed for bankruptcy within the last 8 years?	☑ No	District				Case number
		District			MM/ DD/YYYY	
		-			MM / DD / YYYY	Case number
		District		en	MM / DD / YYYY	Case number
Are any bankruptcy cases pending or being	₩ No					
filed by a spouse who is	Yes.	Debtor	***************************************			Relationship to you
not filing this case with you, or by a business partner, or by an affiliate?		District	Who	en	MM / DD / YYYY	Case number, if known
		Debtor				Relationship to you
						Case number, if known
Do you rent your residence?	☐ No. ☑ Yes.	Go to line 12. Has your landlord o residence?	btained an eviction ju	ıdgr	ment against you a	and do you want to stay in your
		Has your landlord o		dgr	ment against you a	and do you want to stay in your

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Debt	or 1 Sullivan	me	Hollis Last Name		C	Case number (if kno	own)	
			List Harie					
Par	Report About Any	Busines	ses You Own as a S	ole Prop	rietor			
12.	Are you a sole proprietor of any full- or part-time	☑ No.	. Go to Part 4.					
Ł	ousiness?	Yes	s. Name and location of t	ousiness				
d ir	A sole proprietorship is a business you operate as an ndividual, and is not a eparate legal entity such as		Name of business, if any					MAPA.
а	corporation, partnership, or LC.		Number Street	***************************************				
S	f you have more than one ole proprietorship, use a eparate sheet and attach it				·			<u></u>
	this petition.		City	······································	***************************************	State	ZIP Code	
						o acto	ZII Odde	
			Check the appropriate					
			Health Care Busine					
			Single Asset Real E				3))	
			Stockbroker (as del					
			☐ Commodity Broker☐ None of the above	(as deimed	in 11 U.S.C. §	101(6))		
C B aı	re you filing under hapter 11 of the ankruptcy Code and re you a small business	most re	appropriate deadlines. It	you indica ement of on	te that you are erations_cash-	a small busines	e small business debtor so that ss debtor, you must attach your , and federal income tax return 1116(1)(B).	r
	ebtor? or a definition of <i>small</i>	🗹 No.	I am not filing under Ch	apter 11.				
bι	usiness debtor, see U.S.C. § 101(51D).	☐ No.	I am filing under Chapte the Bankruptcy Code.	er 11, but I :	am NOT a sma	II business deb	tor according to the definition in	ì
		Yes.	I am filing under Chapte Bankruptcy Code.	r 11 and I a	am a small busi	iness debtor ac	cording to the definition in the	
Part	4: Report if You Own o	r Have	Any Hazardous Prop	erty or A	ny Property	That Needs	Immediate Attention	
4 D.		V-111						· · · · · · · · · · · · · · · · · · ·
pr	you own or have any operty that poses or is	☑ No						
of ide pu	leged to pose a threat imminent and entifiable hazard to ablic health or safety?	⊔ Yes.	What is the hazard?	Market and the second of the s				
pr	operty that needs mediate attention?		If immediate attention is	s needed, v	why is it needed	1?		
per tha	r example, do you own rishable goods, or livestock It must be fed, or a building It needs urgent repairs?			-				
			Where is the property?	Number	Street			
						~~~~~		
				City		<del></del>	State ZIP Code	

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Debtor 1	Sullivan First Name Middle P	Hollis	<u>}</u>	Case number (if known)	
	BROME	Name Last Name		· <del></del>	***
Part 5	Explain Your Effo	rts to Receive a B	riefing About Credit Counseling		
	the court whether have received a	About Debtor 1:		About Debtor 2	Spouse Only in a Joint Case):
brie	fing about credit	You must check o	ne:	You must check of	one:
The law requires that you receive a briefing about cre	law requires that you	Counseling ag	riefing from an approved credit gency within the 180 days before ! rruptcy petition, and I received a completion.	counseling a	riefing from an approved credit gency within the 180 days before I kruptcy petition, and I received a completion.
bani	fully check one of the	Attach a copy of plan, if any, the	of the certificate and the payment at you developed with the agency.	Attach a copy	of the certificate and the payment at you developed with the agency.
follo canr eligil	wing choices. If you not do so, you are not ole to file.  u file anyway, the court	counseling ag filed this bank certificate of c	·	l received a b	riefing from an approved credit gency within the 180 days before I kruptcy petition, but I do not have a
can will h you j	dismiss your case, you ose whatever filing fee oaid, and your creditors	Within 14 days you MUST file plan, if any.	after you file this bankruptcy petition, a copy of the certificate and payment	Within 14 days you MUST file plan, if any.	after you file this bankruptcy petition, a copy of the certificate and payment
can begin collecti again.	pegin collection activities n.	services from unable to obta days after i ma	asked for credit counseling an approved agency, but was in those services during the 7 ade my request, and exigent amerit a 30-day temporary waiver nent.	I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the days after I made my request, and exigent circumstances merit a 30-day temporary was of the requirement.	
		requirement, at what efforts you you were unabl	day temporary waiver of the tach a separate sheet explaining a made to obtain the briefing, why e to obtain it before you filed for a what exigent circumstances file this case.	requirement, a what efforts yo you were unab	day temporary waiver of the tach a separate sheet explaining u made to obtain the briefing, why le to obtain it before you filed for dwhat exigent circumstances file this case.
		dissatisfied with briefing before y If the court is sa still receive a br You must file a agency, along w developed, if an may be dismissing Any extension o	be dismissed if the court is your reasons for not receiving a rou filed for bankruptcy. tisfied with your reasons, you must iefing within 30 days after you file. certificate from the approved with a copy of the payment plan you y. If you do not do so, your case ed. f the 30-day deadline is granted and is limited to a maximum of 15	Your case may dissatisfied with briefing before If the court is a still receive a buyou must file a agency, along y developed, if ar may be dismiss Any extension of	be dismissed if the court is a your reasons for not receiving a you filed for bankruptcy. Attisticed with your reasons, you must riefing within 30 days after you file, certificate from the approved with a copy of the payment plan you by. If you do not do so, your case
		l am not require credit counseli	ed to receive a briefing about ng because of:	l am not requir credit counsel	ed to receive a briefing about ing because of:
		☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.	☐ Incapacity.	I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.
		Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.	Disability.	My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.
		Active duty.	I am currently on active military duty in a military combat zone.	☐ Active duty	I am currently on active military duty in a military combat zone.
		briefing about cre	u are not required to receive a edit counseling, you must file a rof credit counseling with the court.	briefing about cr	u are not required to receive a edit counseling, you must file a r of credit counseling with the court.

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Debtor 1	Sullivan First Name Middle Nat	Hollis The Last Name	Case number (if it	nown)
Part 6:	Answer These Que	stions for Reporting Purpo	ses	
16. What you h	kind of debts do	16a. <b>Are your debts prima</b> as "incurred by an individ	arily consumer debts? Consumer dei ual primarily for a personal, family, or hou	bts are defined in 11 U.S.C. § 101(8) usehold purpose."
,		No. Go to line 16b.  Yes. Go to line 17.		
		16b. <b>Are your debts prima</b> money for a business or i	<b>urily business debts?</b> Business debts nvestment or through the operation of the	are debts that you incurred to obtain business or investment.
		No. Go to line 16c. Yes. Go to line 17.		
		16c. State the type of debts yo	ou owe that are not consumer debts or bu	siness debts.
17. Are yo	ou filing under er 7?	□ No. I am not filing under C	Chapter 7. Go to line 18.	
any ex exclud admin are pa availal	u estimate that after cempt property is led and istrative expenses id that funds will be ble for distribution ecured creditors?	Yes. I am filing under Chap administrative expense M No	eter 7. Do you estimate that after any exer es are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?
	nany creditors do	2 1-49	<ul> <li>1,000-5,000</li> </ul>	25,001-50,000
you es owe?	timate that you	50-99 100-199 200-999	5,001-10,000 10,001-25,000	50,001-100,000  More than 100,000
9. How m estima be wor	nuch do you te your assets to th?	□ \$0-\$50,000 ☑ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	uch do you te your liabilities	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion
Part 7:	Sign Below	■ \$500,001-\$1 million	□ \$100,000,001-\$500 million	☐ More than \$50 billion
or you		I have examined this petition, ar correct.	nd I declare under penalty of perjury that	the information provided is true and
		If I have chosen to file under Ch of title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I may proceed, it understand the relief available under each	f eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed
		If no attorney represents me and this document, I have obtained a	d I did not pay or agree to pay someone vand read the notice required by 11 U.S.C.	who is not an attorney to help me fill out . § 342(b).
		I request relief in accordance wit	th the chapter of title 11, United States Co	ode, specified in this petition.
		I understand making a false stat with a bankruptcy case can resu 18 U.S.C. §§ 152, 1341, 1519, a	Ift in fines up to \$250,000, or imprisonmen	money or property by fraud in connection nt for up to 20 years, or both.
		* Sull Hall	<b>X</b>	
		Signature of Debtor 1	•	of Debtor 2
		Executed on <u>202-13-</u> MM / DD / Y	20/7 Executed	on

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Debtor 1	Sullivan First Name Middle Name	Hollis Last Name	Case number (it known)			
bankrupi attorney	if you are filing this ccy without an	snould understand themselves successfu	an individual, to represent yourself in bankruptcy court, but you at many people find it extremely difficult to represent ally. Because bankruptcy has long-term financial and legal re strongly urged to hire a qualified attorney.			
If you are represented by an attorney, you do not need to file this page.		To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.				
		in your schedules. If you property or properly claim also deny you a discharge case, such as destroying cases are randomly audit	perty and debts in the schedules that you are required to file with the pay a particular debt outside of your bankruptcy, you must list that debt do not list a debt, the debt may not be discharged. If you do not list a it as exempt, you may not be able to keep the property. The judge can be of all your debts if you do something dishonest in your bankruptcy or hiding property, falsifying records, or lying. Individual bankruptcy ded to determine if debtors have been accurate, truthful, and complete.			
		If you decide to file withou hired an attorney. The con successful, you must be for Bankruptcy Procedure, ar	at an attorney, the court expects you to follow the rules as if you had ourt will not treat you differently because you are filing for yourself. To be amiliar with the United States Bankruptcy Code, the Federal Rules of ad the local rules of the court in which your case is filed. You must also exemption laws that apply.			
		consequences?	or bankruptcy is a serious action with long-term financial and legal			
		☐ No ☑ Yes				
		maccurate or incomplete,	uptcy fraud is a serious crime and that if your bankruptcy forms are you could be fined or imprisoned?			
		☐ No				
		🗷 Yes				
		Yes. Name of Person	Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			
		nave read and understood	edge that I understand the risks involved in filing without an attorney. I this notice, and I am aware that filing a bankruptcy case without an lose my rights or property if I do not properly handle the case.			
	,	× Sull Hall	<b>x</b>			
		Signature of Debtor 1	Signature of Debtor 2			
		Date <u>02-13-2</u> MM / DD / YYY	017 Date MM / DD / YYYY			
		Contact phone 708-3	72-48// Contact phone			
		Cell phone	Cell phone			
		Email address	Email address			

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	s information to iden	itify your case:			
Debtor 1	Sullivan First Name	Middle Name	Hollis Last Name		
Debtor 2 (Spouse, if fi	iling) First Name	Middle Name	Last Name		
United Stat	tes Bankruptcy Court for t	the: Northern District of			
Case numb	ber (If known)				Check if this is amended filing
Officia	l Form 106Sเ	um			
		······	iabilities and	Certain Statistical Info	ormation 12/15
our origin	n. Fill out all of your s	schedules first; then o ill out a new <i>Summar</i> )	ried people are filing tog complete the information y and check the box at th	ether, both are equally responsible for on this form. If you are filing amende e top of this page.	supplying correct d schedules after you file
					Your assets Value of what you own
Schedul	e A/B: Property (Officia				0.00
	and the same of th	tota from Cabadila Al			
	y line 55, Total real est	iate, nom Scriedule A/E	3		. \$0.00
1a. Copy					
1a. Copy	/ line 62, Total persona	al property, from Sched	lule A/B		. \$ 3,150.00
1a. Copy  1b. Copy  1c. Copy	/ line 62, Total persona	al property, from Sched	lule A/B		s3,150.00
1a. Copy 1b. Copy 1c. Copy	/ line 62, Total persona	al property, from Sched	lule A/B		\$ 3,150.00 \$ 3,150.00 Your liabilities
1a. Copy  1b. Copy  1c. Copy  art 2:	y line 62, Total personal value 63, Total of all pro Summarize Your L  D: Creditors Who Ha	al property, from Sched operty on Schedule A/E iabilities	Property (Official Form 106	SD)	\$ 3,150.00  \$ 3,150.00  Your liabilities Amount you owe
1a. Copy  1b. Copy  1c. Copy  art 2:	y line 62, Total personal value 63, Total of all pro Summarize Your L  D: Creditors Who Ha	al property, from Sched operty on Schedule A/E iabilities	Property (Official Form 106		\$ 3,150.00 \$ 3,150.00 Your liabilities
1a. Copy  1b. Copy  1c. Copy  art 2:	y line 62, Total personal y line 63, Total of all pro Summarize Your L  D: Creditors Who Ha y the total you listed in the	al property, from Schedule A/E  iabilities  ve Claims Secured by the Column A, Amount of the Claims Secured Claims Secured Claims	Property (Official Form 106 Sclaim, at the bottom of the interest of the inter	SD) ast page of Part 1 of Schedule D	\$3,150.00  \$3,150.00  Your liabilities Amount you owe \$8,022.00
1a. Copy  1b. Copy  1c. Copy  Schedule 2a. Copy  Schedule 3a. Copy	y line 62, Total personal line 63, Total of all prosper summarize Your L.  By D: Creditors Who Have the total you listed in the total claims from Figure 1.	al property, from Schedule A/E  inabilities  Ive Claims Secured by It  Column A, Amount of a  dave Unsecured Claims  Part 1 (priority unsecure	Property (Official Form 106 claim, at the bottom of the is (Official Form 106E/F) ed claims) from line 6e of 5	SD) ast page of Part 1 of Schedule D	\$ 3,150.00  \$ 3,150.00  Your liabilities Amount you owe \$ 8,022.00  \$ 0.00
1a. Copy  1b. Copy  1c. Copy  art 23:  Schedule 2a. Copy  Schedule 3a. Copy	y line 62, Total personal line 63, Total of all prosper summarize Your L.  By D: Creditors Who Have the total you listed in the total claims from Figure 1.	al property, from Schedule A/E  inabilities  Ive Claims Secured by It  Column A, Amount of a  dave Unsecured Claims  Part 1 (priority unsecure	Property (Official Form 106 claim, at the bottom of the is (Official Form 106E/F) ed claims) from line 6e of 5	SD) ast page of Part 1 of Schedule D	\$ 3,150.00  \$ 3,150.00  Your liabilities Amount you owe \$ 8,022.00  \$ 0.00

### Schedule I: Your Income (Official Form 106I)

Copy your combined monthly income from line 12 of Schedule I

4,930.00

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De	ebtor 1 Sullivan First Name Middle Name Last Name		Hollis	Case number (if known)	Case number (# known)			
Pá	art 4:	Answer The	ese Questions	i for Administi	rative and Stati	stical Records		
6.	Are you	filing for bar	nkruptcy under	Chapters 7, 11,	or 13?			
	No. Yes	You have noth	ning to report on	this part of the fo	rm. Check this box	and submit this form to the court with your o	ther schedul	es.
7.	What kir	nd of debt do	you have?		***************************************		.,	
	Your famil	r debts are pi y, or househo	rimarily consum ld purpose." 11 l	ner debts. Consu U.S.C. § 101(8). F	mer debts are thos	se "incurred by an individual primarily for a peor statistical purposes. 28 U.S.C. § 159.	ersonal,	
	Your this f	r debts are no form to the col	ot primarily con urt with your othe	sumer debts. Yo er schedules.	ou have nothing to	report on this part of the form. Check this box	x and submit	
8.	From the	e <i>Statement</i> ( 2A-1 Line 11;	of Your Current OR, Form 122B	Monthly Income Line 11; OR, For	e: Copy your total om 122C-1 Line 14.	current monthly income from Official	\$	4,930.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim
From Part 4 on Schedule E/F, copy the following:	
9a. Domestic support obligations (Copy line 6a.)	\$0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
9d. Student loans. (Copy line 6f.)	\$
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$0.00

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Fill in th	nis information to identify your case and thi	s filing:		
Debtor 1	Sullivan	Hollis		
Debtor 2	First Name Middle Name	Last Name		
	filing) First Name Middle Name	Last Name		
United St	ates Bankruptcy Court for the: Northern District of	Illinois		
Case nur	nber		٢	T Chapte if this is as
***************************************			<u>.</u>	Check if this is an amended filing
Offic	ial Form 106A/B			
	nedule A/B: Propert	N. S		
				12/15
categor respons	y where you think it fits best. Be as comple sible for supplying correct information. If m our name and case number (if known). Ansv	s. List an asset only once. If an asset fits in more ete and accurate as possible. If two married peopl ore space is needed, attach a separate sheet to the ver every question.  Land, or Other Real Estate You Own or Ha	e are filing together, bo is form. On the top of a	oth are equally
1. Do vo		st in any residence, building, land, or similar prop		
	o. Go to Part 2.	at in any residence, building, land, or sitinar prop	erty r	
☐ Ye	es. Where is the property?			
		What is the property? Check all that apply.  Single-family home	Do not deduct secured cla the amount of any secure	aims or exemptions. Put
1.1.	Street address, if available, or other description	Duplex or multi-unit building	Creditors Who Have Clair	ns Secured by Property.
		Condominium or cooperative	Current value of the	Current value of the
		☐ Manufactured or mobile home ☐ Land	entire property?	portion you own?
		Investment property	Ψ	Φ
	City State ZIP Code	Timeshare Other	Describe the nature of interest (such as fee	simple, tenancy by
		Who has an interest in the property? Check one.	the entireties, or a life	e estate), if known.
		Debtor 1 only		
	County	Debtor 2 only		
		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	mmunity property
		Other information you wish to add about this it	em, such as local	
lfyou	own or have more than one, list here:	property identification number:	· · · · · · · · · · · · · · · · · · ·	
ii you	own or have more than one, list here:	What is the property? Check all that apply.	<b>.</b>	
4.0		☐ Single-family home	Do not deduct secured cla the amount of any secured	d claims on <i>Śchedule D:</i>
1.2.	Street address, if available, or other description	Duplex or multi-unit building Condominium or cooperative	Creditors Who Have Clain	ns Secured by Property.
		Condominium or cooperative  Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
		Land	\$	\$
		investment property  Timeshare	Describe the nature o	f vour ownership
	City State ZIP Code	Other	interest (such as fee s the entireties, or a life	simple, tenancy by
		Who has an interest in the property? Check one.  Debtor 1 only		
	County	Debtor 2 only		
		Debtor 1 and Debtor 2 only	Check if this is con	mmunity property
		At least one of the debtors and another	(see instructions)	
		Other information you wish to add about this iter property identification number:	n, such as local	

Official Form 106A/B

Case 17-04043 Doc 1 Filed 02/13/17 Entered 02/13/17 12:08:55 Desc Main Document Page 11 of 52 Sullivan Debtor 1 Hollis Case number (if known) First Name Middle Name What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put Single-family home the amount of any secured claims on Schedule D: 1.3 Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home ☐ Land ☐ Investment property Describe the nature of your ownership City ZIP Code ☐ Timeshare State interest (such as fee simple, tenancy by Other_ the entireties, or a life estate), if known, Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ☑ Yes Ford Who has an interest in the property? Check one. 3.1 Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Edge Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2010 Year: Current value of the Debtor 1 and Debtor 2 only Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: 9.000.00 1.000.00 Check if this is community property (see instructions) If you own or have more than one, describe here: Who has an interest in the property? Check one. Make: 3.2. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property.

Year:

Approximate mileage:

Other information:

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property (see

Debtor 2 only

instructions)

Current value of the

portion you own?

Current value of the

entire property?

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Sullivan Hollis Debtor 1 Case number (if known), Last Name First Name Middle Name Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. 3.4. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the 
Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Approximate mileage: At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ☐ No Yes Who has an interest in the property? Check one. 4.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another entire property? portion you own? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Do not deduct secured claims or exemptions. Put 4.2. Make: the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another ☐ Check if this is community property (see instructions) 5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages 1.000.00 you have attached for Part 2. Write that number here

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Debtor 1

Sullivan First Name

Middle Name

Hollis Last Name

Case number (if known)_

Describe Your Personal and Household Home	

Do you own or have any legal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings	•
Examples: Major appliances, furniture, linens, china, kitchenware	
□ No	
Yes. Describe Household furniture, kitchen ware, linens, and small appliance	<b>\$</b> 1,200.00
7. Electronics	
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mu collections; electronic devices including cell phones, cameras, media players, games	usic
Q No	
Yes. Describe 2 televisions, cell phone, radio	\$400.00
8. Collectibles of value	and the same state of the same
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No	
☐ Yes. Describe	\$
9. Equipment for sports and hobbies	-
·	
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; can- and kayaks; carpentry tools; musical instruments	oes
F70	
Yes, Describe	
	<b>\$</b>
10. Firearms	1 Marie 100 100 Marie 100
Examples: Pistols, rifles, shotguns, ammunition, and related equipment  No	
☐ Yes. Describe	
	<b>\$</b>
11. Clothes	
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories	
Q No	
Yes. Describe clothing, shoes, winter boots, coat	\$400.00
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems gold, silver	3,
☑ No	
Yes. Describe	\$
13. Non-farm animals	Ψ
Examples: Dogs, cats, birds, horses	
☑ No	tradición se sussima que por por por por por
Yes. Describe	\$
14. Any other personal and household items you did not already list, including any health aids you did not list	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1
☑ No	
Yes. Give specific	
4.4	\$
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	\$
for Part 3. Write that number here	

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Debtor 1

Sullivan

First Name

Middle Name Last Name Hollis

Case number (if known)_

Do you own or have any	y legal or equitable interest in	any of the following?	Current value of the portion you own? Do not deduct secured claim or exemptions.
16. Cash			
	have in your wallet, in your hor	ne, in a safe deposit box, and on hand when you file you	ar petition
☐ No ☐ ✓			
165		Cash	\$ 100.00
17. <b>Deposits of money</b> Examples: Checking, and other s	savings, or other financial accor similar institutions. If you have n	unts; certificates of deposit; shares in credit unions, brok uultiple accounts with the same institution, list each.	erage houses,
☐ No			
<b>2</b> Yes		Institution name:	
	17.1. Checking account:	Bank Financial	\$50.00
	17.2. Checking account:		\$
	17.3. Savings account:		\$
	17.4. Savings account:		
	17.5. Certificates of deposit:		
	17.6. Other financial account:		
	17.7. Other financial account:		
	17.8. Other financial account:		
	17.9. Other financial account:		
	or publicly traded stocks investment accounts with broken	erage firms, money market accounts	
2 No			
☐ Yes	Institution or issuer name:		
			\$
			<u> </u>
			\$
9. Non-publicly traded s an LLC, partnership, a	tock and interests in incorpor	ated and unincorporated businesses, including an i	nterest in
💋 No	Name of entity:	% of o	wnership:
Yes. Give specific information about		0%	% \$
them	***************************************	0%	% \$
		0%	% \$

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Debtor 1	Sullivan First Name	Middle Name	Hollis	Case number (if known)	
	1 Ket Ivaing	Middle Name	ast Name		
			er negotiable and non-r	negotiable instruments omissory notes, and money orders.	
Non-n	egotiable instrum	ents are those you ca	nnot transfer to someone	by signing or delivering them.	
<b>☑</b> No	)				
	s. Give specific ormation about	Issuer name:			
	m				\$
					\$
				-	\$
21. Retire	ment or pension	accounts			
Examp	oles: Interests in II		01(k), 403(b), thrift saving	s accounts, or other pension or profit-sharing plans	
Ø No □					
	s. List each count separately.	Type of account:	Institution name:		
		401(k) or similar plan:			\$
		Pension plan:			\$
		IRA:			
		Retirement account:			\$
		Keogh:			\$ \$
		Additional account:			
		Additional account:			\$
		Additional account.			\$
22 Securit	ty deposits and _i	rangumante			
Your st	nare of all unused	deposits you have m	ade so that you may cont	tinue service or use from a company	
Examp compa	les: Agreements v nies, or others	with landlords, prepaid	d rent, public utilities (elec	ctric, gas, water), telecommunications	
☑ No					
Yes	<b>5</b>	Ins	titution name or individual:		
		Electric:			\$
		Gas:			\$
		Heating oil:	***		\$
		Security deposit on ren	tal unit:		\$
		Prepaid rent:			\$
		Telephone:			\$
		Water:			\$
		Rented furniture: Other:			\$
			A-144-144-144-144-144-144-144-144-144-14		\$
23. Annuiti	es (A contract for	a periodic navment o	f money to you laithar for	life or for a number of years)	
<b>☑</b> No	prosiderior	a ponodio payarente o	, money to you, entire to:	are or for a number of years)	
	;	Issuer name and desc	ription:		
					\$
					\$

Case 17-04043 Doc 1 Filed 02/13/17 Entered 02/13/17 12:08:55 Desc Main Document Page 16 of 52 Sullivan Hollis Debtor 1 Case number (if known) First Name Middle Name Last Name 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). No No ☐ Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit Z No ☐ Yes. Give specific information about them.... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements Z No Yes. Give specific information about them... \$ 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses Z No Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you Z No ☐ Yes. Give specific information Federal: about them, including whether you already filed the returns State: and the tax years. ..... Local:

29. Family support

Examples.	Past d	ue or lump	sum alimony,	, spousal support,	child support,	maintenance	, divorce settlement,	property	settlemen
-----------	--------	------------	--------------	--------------------	----------------	-------------	-----------------------	----------	-----------

V No

☐ Yes	Give specific information	

 Personn	
Alimony:	\$
Maintenance:	\$
Support:	\$
Divorce settlement:	\$
Property settlement:	\$

30. Other amounts someone owes you

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

$\mathbf{Z}$	No	
	Yes. Give specific information	

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Debtor 1	First Name	Middle Name	1 + 21	noms	Case number (# known)	
	i not realite	miudie Maine	Last Name			
	s in insuranc					
	es: Health, disa	ability, or life insura	nce; health savir	igs account (HSA)	credit, homeowner's, or renter's insurance	
<b>Z</b> No						
☐ Yes.	Name the inst of each policy	urance company and list its value	Company name	e:	Beneficiary:	Surrender or refund value:
						\$
						\$
						\$
32 Any inte	rest in prope	rty that is due you	from comcons			
If you are	e the beneficia	ry of a living trust, e eone has died.	expect proceeds	from a life insuran	ce policy, or are currently entitled to receive	
	Give enacific i	nformation		**************************************		
- 100.	Olve specific i	monnauon				\$
33. Ulaims a Example	i <b>gainst third p</b> s: Accidents le	parties, whether or employment dispute	not you have t	iled a lawsuit or r	nade a demand for payment	
☑ No	o. , , , , , , , , , , , , , , , , , , ,	mpioyment dispute	s, mourance cra	inis, or rights to su	<del>2</del>	
	Describe each	ı claim		00000000000000000000000000000000000000		ayamya ya
				**************************************		\$
34. Other co	ntingent and	unliquidated clain			nterclaims of the debtor and rights	
to set of	f claims		·	_		
	Dagarika asat					^
☐ Yes.	Describe each	claim				\$
		***				, v
	icial assets y	ou did not already				
☑ No		- The state of the				
Yes.	Give specific in	nformation				\$
				***************************************		
36. Add the	dollar value o	f all of your entrie	s from Part 4, ii	cluding any entri	es for pages you have attached	
for Part 4	. Write that n	umber here		•	→	\$150.00
Part 5:	Describe <i>A</i>	ny Business-F	Related Prop	erty You Owi	n or Have an Interest In. List any r	eal estate in Part 1.
***************************************	******************************					
	wn or nave ar o to Part 6.	ıy legal or equitab	le interest in ar	y business-relate	d property?	
	o το Part 6. So to line 38.					
uar res. €	ou to line so.					
						Current value of the
						portion you own?  Do not deduct secured claims
						or exemptions.
38. Accounts	receivable o	r commissions yo	u already earne	d		
☐ No						
Yes. D	Describe		after a facility and a second for the facility of the facility			
	Ĺ					\$
		ishings, and supp				
Examples: 1	Business-related	computers, software,	modems, printers	copiers, fax machine	s, rugs, telephones, desks, chairs, electronic devices	
□ No		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and the state of the			mg
	escribe					\$

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Sullivan Hollis Debtor 1 Case number (if known) First Name 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade Yes. Describe..... 41. Inventory ☐ No Yes. Describe. 42. Interests in partnerships or joint ventures ☐ No Yes. Describe...... Name of entity: % of ownership: % % 43. Customer lists, mailing lists, or other compilations ☐ No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? Yes. Describe...... 44. Any business-related property you did not already list ☐ No ☐ Yes. Give specific information ...... 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47. Current value of the portion you own? Do not deduct secured claims or exemptions. 47. Farm animals Examples: Livestock, poultry, farm-raised fish ☐ No ☐ Yes.....

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Case 17-04043 Desc Main Document Page 19 of 52 Sullivan Hollis Debtor 1 Case number (if known) First Name Middle Name Last Name 48. Crops—either growing or harvested ☐ No Yes. Give specific information..... 49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade ☐ No ☐ Yes..... 50. Farm and fishing supplies, chemicals, and feed ☐ No Yes 51. Any farm- and commercial fishing-related property you did not already list ☐ No Yes. Give specific information..... 52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information..... 54. Add the dollar value of all of your entries from Part 7. Write that number here Part 8: List the Totals of Each Part of this Form 0.00 55. Part 1: Total real estate, line 2 ...... 1,000.00 56. Part 2: Total vehicles, line 5 2,000.00 57. Part 3: Total personal and household items, line 15 150.00 58. Part 4: Total financial assets, line 36 0.00 59. Part 5: Total business-related property, line 45 0.00 60. Part 6: Total farm- and fishing-related property, line 52 0.00 61. Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61.

63. Total of all property on Schedule A/B. Add line 55 + line 62.

3,150.00

Copy personal property total -> +\$

3,150.00

3,150.00

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Fill in th	is information to identi	fy your case:			
Debtor 1	Sullivan Fist Name		Hollis		
Debtor 2		Middle Name	Last Name		
	filing) First Name	Middle Name	Last Name		
_	ates Bankruptcy Court for the	e: Northern District of II	linois		
Case num (If known)	nber				Check if this is an amended filing
	I Form 106C				
Sche	edule C: Ti	ne Proper	ty You	Claim as Exemp	<b>t</b> 04/16
Using the page is no	property you listed on Sc.	hedule A/B: Property (0 to this page as many c	Official Form 106	ogether, both are equally responsible for A/B) as your source, list the property that Additional Page as necessary. On the top	you claim as exempt. If more
specific do of any appretirement limits the	ollar amount as exempt plicable statutory limit. t funds—may be unlimit	. Alternatively, you m Some exemptions—s ted in dollar amount. ar dollar amount and	lay claim the ful uch as those fo However, if you	amount of the exemption you claim. O I fair market value of the property beir I health aids, rights to receive certain claim an exemption of 100% of fair ma property is determined to exceed that	g exempted up to the amount benefits, and tax-exempt arket value under a law that
Part 1:	Identify the Prope	-	xempt		
1. Which	set of exemptions are	vou claiming? Check	one only, even it	f your spouse is filing with you.	
☐ Yo	ou are claiming state and	federal nonbankruptcy	exemptions. 11		
☐ Yo	ou are claiming federal ex	emptions, 11 U.S.C. §	522(b)(2)		
2. For an	y property you list on :	Schedule A/B that you	ı claim as exem	pt, fill in the information below.	
	description of the prope dule A/B that lists this p		ent value of the on you own	Amount of the exemption you claim	Specific laws that allow exemption
			the value from dule A/B	Check only one box for each exemption.	
Brief		\$		□ s	
descri Line fi		Ψ	****	100% of fair market value, up to	
	dule A/B:			any applicable statutory limit	
Brief	ntion:	\$		<b>□</b> \$	
descri Line fr	'	<u> </u>	······································	100% of fair market value, up to	
Sched	fule A/B:			any applicable statutory limit	mus
Brief descri	ption:	\$		<b></b> \$	
Line fr				100% of fair market value, up to any applicable statutory limit	
Scred	fule A/B:			any applicable statutory littit	
	ou claiming a homestea				
(Subje		19 and every 3 years a	Ifter that for cases	s filed on or after the date of adjustment.	
		operty covered by the	exemption within	1,215 days before you filed this case?	
		-p y coronad by allo		., o dayo bolole you lied this case?	

Yes

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Fill in this information to identify your ca-	Se:			
Cullings	Hollis			
First Name Middle				
Debtor 2 (Spouse, if filing) First Name Middle	Name Last Name			
United States Bankruptcy Court for the: Northern	District of Illinois			
Case number				
(If known)				if this is an led filing
Official Form 1000			amona	ca ming
Official Form 106D				
Schedule D: Creditor	s Who Have Claims Secur	ed by Pro _l	perty	12/15
intormation, it more space is needed, cop	If two married people are filing together, both are e y the Additional Page, fill it out, number the entries,	qually responsible f and attach it to this	or supplying correct form. On the top of	t any
additional pages, write your name and cas	se number (if known).			
1. Do any creditors have claims secured b				
<ul><li> ☐ No. Check this box and submit this form ☐ Yes. Fill in all of the information below. </li></ul>	m to the court with your other schedules. You have noth	ing else to report on	this form.	
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has n	nore than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor h	as a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Amount of claim  Do not deduct the	Value of collateral that supports this	Unsecured portion
2.1	mbellour order according to the creditor's frame.	value of collateral.	claim (A. A. A	If any
Creditor's Name	Describe the property that secures the claim:	\$ 8,022.00	\$8,000.00	_{\$} 22.00
PNC Bank	2010 Ford Edge			
Number Street		]		
PO Box 3180	As of the date you file, the claim is: Check all that apply.  Gontingent			
Pittsburgh PA 15230 City State ZIP Code	☐ Unliquidated			
,	Disputed			
Who owes the debt? Check one.  Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit     Other (including a right to offset)			
Check if this claim relates to a	Other (illiduding a right to offset)	-		
community debt  Date debt was incurred 04/16/ <del>0201</del>	Last 4 digits of account number			
2.2	Describe the property that secures the claim:	er da samuna eta erazio e del ceració de descripente estrenación, con como estre E	tition that the second recommendate recommendation and the second recommendation of the second recommen	
Creditor's Name	Free Control of the C	\	Ψ	P
Number Street		TO COLUMN TO COL		
	As of the date you file, the claim is: Check all that apply.	i i		
	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one,	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured)			
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit			
	Other (including a right to offset)			
Check if this claim relates to a community debt	· ·			
Date debt was incurred	Last 4 digits of account number	or Anti-open years of the second		
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	s 8,022.00	eran terrene eran eran eran eran eran eran era	

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Fi	ll in this	information to ide	ntify your case:					
		Sullivan		Hollis	•			
Ue	ebtor 1	First Name	Middle Name	Last Name				
	ebtor 2 pouse, if filin	lg) First Name	Middle Name	Last Name				
Ur	nited States	s Bankruptcy Court for	the: Northern District	of Illinois				
Cé	ase numbe				<b>f</b>			heck if this is an
(11	known)	70777	T				ar	mended filing
	·····	Form 106E						
50	ched	ule E/F: C	reditors V	<b>Vho Have Unsec</b>	ured Clain	ns		12/15
A/B cred need any	the other Propert ditors wit ded, cop addition	or party to any exect ty (Official Form 10 th partially secured by the Part you nee all pages, write you	cutory contracts or i 96A/B) and on <i>Sche</i> d d claims that are list	•	t in a claim. Also lis Unexpired Leases (G Have Claims Secur	st executory of Official Form and by Property	contracts or 106G). Do n	Schedule ot include any
2.	₩ No. G Yes.  List all of	io to Part 2. <b>f your priority uns</b>	rity unsecured claim	reditor has more than one priority u	nsecured claim, list th	ne creditor sep	arately for ea	ach claim. For
£	each clain nonpriority unsecured	n listed, identify who y amounts. As mucl d claims, fill out the	at type of claim it is. If h as possible, list the Continuation Page of	a claim has both priority and nonprictaims in alphabetical order according Part 1. If more than one creditor houstructions for this form in the instructions.	iority amounts, list the ng to the creditor's na Ilds a particular claim	at claim here a	ind show bot	th priority and
'	i oi airez	Apianation of each t	ype of claim, see the i	nstructions for this form in the instr	uction booklet.)	Total claim	Priority	Nonpriority
						Total Odini	amount	amount
2.1				1 - 4 4 - 47 - 24 5		\$	\$	•
	Pnority Cre	editor's Name		Last 4 digits of account number		Φ		\$
	Number	Street		When was the debt incurred?				
				An af the date St. al	• • •			
				As of the date you file, the claim	is: Check all that apply.			
	City		State ZIP Code	Contingent				
	Who inc	urred the debt? Che	eck one.	Unliquidated				
	Debto			☐ Disputed				
	Debto			Type of PRIORITY unsecured of	:laim:			
		or 1 and Debtor 2 only		Domestic support obligations				
		st one of the debtors a		Taxes and certain other debts yo	u ours the severement			
	☐ Chec	k if this claim is for	a community debt	Claims for death or personal injur				
		aim subject to offse		intoxicated	y write you were			
	□ No		<del>-</del> -	Other. Specify				
	Yes Yes							
2	e e como entre mentre secures se	r sperior personal est de l'article de de misser en de personal de l'article de l'article de l'article de l'ar	and the second of the content of the	oka proministranska komuniya silililar haqininishilililililililililililililililililili				
	Priority Cred	ditor's Name	· · · · · · · · · · · · · · · · · · ·	Last 4 digits of account number		\$	. \$	<u> </u>
				When was the debt incurred?				
	Number	Street			_			
				As of the date you file, the claim	is: Check all that apply.			
				Contingent				
	City	S	State ZIP Code	Unliquidated				
		urred the debt? Che	ck one.	Disputed				
	Debtor			Type of PRIORITY unsecured c	laim:			
	Debtor	•		Domestic support obligations	ıaıfii,			
		r 1 and Debtor 2 only		Taxes and certain other debts you				į
		st one of the debtors a						
	☐ Checl	k if this claim is for	a community debt	<ul> <li>Claims for death or personal injury intoxicated</li> </ul>	white you were			1
	ls the cla ☐ No	im subject to offset	?	Other. Specify				
	Yes							

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Document

Last Name

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Desc Main

Debtor 1

Sullivan First Name

Middle Name

Hollis

Case number (if known)_

er listing any entries on this page, number ther	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	<u> </u>
	When was the debt incurred?			
Number Street	As of the date was file the claim in Oten 1999			
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent Unliquidated Disputed			
Who incurred the debt? Check one.  Debtor 1 only	Type of BDIODITY was a seed of states			
Debtor 2 only	Type of PRIORITY unsecured claim:		•	
Debtor 1 and Debtor 2 only	Domestic support obligations     Taxes and certain other debts you owe the government			
☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	<ul> <li>Claims for death or personal injury while you were intoxicated</li> </ul>			
•	Other. Specify			
Is the claim subject to offset?				
☐ No ☐ Yes				
The COMMAN CONTROL OF THE STREET AND ADDRESS ASSESSMENT AS A COMMAN CONTROL OF THE STREET AND ASSESSMENT AS A COMMAN CONTROL OF THE STREET ASSESSMENT AS A COMMAN CONTROL OF THE STREET ASSESSMENT AS A COMMAN CONTROL OF THE STREET ASSESSMENT ASSESSMENT AS A COMMAN CONTROL OF THE STREET AS A COMMAN CONTR	for the provided form is a substrated and the property of the provided for the provided f		there considered the entertainty and a	
Priority Creditor's Name	Last 4 digits of account number	\$	\$	. \$
Chong Gredital S Name	When was the debt incurred?			
Number Street	when was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated  Other. Specify			
is the claim subject to offset?				
□ No				
		constructive and the construction of the const	PROTENSION (WILLIAM SANSA)	-Vehennetonamonmentonomonomon
	Last 4 digits of account number	\$	\$	\$
Priority Creditor's Name	When you the debt in your 12			
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			:
Who incurred the debt? Check one.	Disputed			:
Debtor 1 only	Type of PRIORITY unsecured claim:			:
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only  At least one of the debtors and another	Taxes and certain other debts you owe the government			!
	Claims for death or personal injury while you were intoxicated			
Check if this claim is for a community debt	Other. Specify	er der eine stade Statistische Spranzische Landerung zu Spranzische Ausgeber zu der der Spranzische Ausgeber d	tini W.vi Labini ang bingatang Lingyya.	(PACIDATA (IA-CIA) da informazione de la companya que la companya que la companya que la companya que la compa
s the claim subject to offset?				
⊒ No				ļ
Yes				

Case 17-04043 Doc 1 Filed 02/13/17 Entered 02/13/17 12:08:55 Desc Main Page 24 of 52 Document Sullivan Debtor 1 Hollis Case number (if known) First Name Part 2: **List All of Your NONPRIORITY Unsecured Claims** 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2. Total claim Carson's Last 4 digits of account number 5 1 0 9 Nonpriority Creditor's Name 701.00 09/12/2013 When was the debt incurred? PO Box 659813 Number Street San Antonio TX 78265 As of the date you file, the claim is: Check all that apply. State ZIP Code ☑ Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts No. other. Specify Credit Card ☐ Yes Discover 8,509.00 Last 4 digits of account number Nonpriority Creditor's Name 05/10/2013 When was the debt incurred? PO Box 6103 Number Carol Stream As of the date you file, the claim is: Check all that apply. IL 60197 State ZIP Code Contingent
Unliquidated Who incurred the debt? Check one. Disputed Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only At least one of the debtors and another ☐ Student loans Obligations arising out of a separation agreement or divorce ☐ Check if this claim is for a community debt that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Z No ✓ Other. Specify <u>credit card</u> Yes Home Depot Credit Services Last 4 digits of account number 8 0 7 3 Nonpriority Creditor's Name 1,882.00 10/03/2013 When was the debt incurred? PO Box 78011 Number Phoenix ΑZ 85062 As of the date you file, the claim is: Check all that apply. State ZIP Code ✓ Contingent Who incurred the debt? Check one. Unliquidated Debtor 1 only Disputed Debtor 2 only Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans Check if this claim is for a community debt Obligations arising out of a separation agreement or divorce that you did not report as priority claims Is the claim subject to offset? Debts to pension or profit-sharing plans, and other similar debts

Ma No

Yes

Other. Specify Credit card

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Debtor 1

Sullivan First Name

Middle Name

Hollis

Case number (if known)__

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M.	м.	-4	٠.	ж	_

Your NONPRIORITY Unsecured Claims — Continuation Page

				4.4, followed by 4.5, and so forth.	Total claim	
	Financial/Cardmember	Service		Last 4 digits of account number 2 3 9 3	\$ 6,122.00	
PO B	y Creditor's Name Box 790408			When was the debt incurred? 02/14/2014	9_0,,	
Number St Lo	Street	МО	62470	As of the date you file, the claim is: Check all that apply.		
City		State	63179 ZIP Code	☐ Contingent☐ Unliquidated		
	curred the debt? Check one.			☐ Disputed		
Debt				Type of NONPRIORITY unsecured claim:		
Debt	or 1 and Debtor 2 only			Student loans		
	ast one of the debtors and anothe			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
		unity debt		Debts to pension or profit-sharing plans, and other similar debts		
Mo No	aim subject to offset?			Other Specify Credit card		
Yes						
-si kisalingi gagaga usung	et til en til en til en til ett er til ett er til en t		ko kontarti kortinet dos artiketa eta etilizia kepelatzea eta eta eta eta eta eta eta eta eta e	Last 4 digits of account number 8 2 0 7	0 E2C 00	
Best E Nonpriority	Buy Credit Services Creditor's Name			Last 4 digits of account number 0 2 0 1	\$_9,536.00	
	0x 78009 Street	······································		When was the debt incurred? 01/30/2013		
Phoer		ΑZ	85062	As of the date you file, the claim is: Check all that apply.		
City	1411-14-1	State	ZIP Code	✓ Contingent		
Who inc	urred the debt? Check one.			Unliquidated		
✓ Debte				☐ Disputed		
Debte	or 2 only			Type of NONPRIORITY unsecured claim:		
	or 1 and Debtor 2 only			☐ Student loans		
	ist one of the debtors and anothe			Obligations arising out of a separation agreement or divorce that		
Chec	k if this claim is for a comm	unity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts		
ls the cla ☑ No	aim subject to offset?			Other. Specify <u>Credit card</u>		
☐ Yes	r43 F441177664437456467456676468688688688688688868888888888	y/2000-114000-144000-14400-14-00	t delected to the control of the con			
 Capita	l One Bank			Last 4 digits of account number 2 0 0 3	\$ 10,078.Q	
Nonpriority	Creditor's Name			When was the debt incurred? 03/31/2013		
PO Bo	x 6492 Street	***************************************		When was the dept incurred?		
Carol	Stream	IL	60197	As of the date you file, the claim is: Check all that apply.		
City	<del></del>	State	ZIP Code	Contingent		
Who inc	urred the debt? Check one.			☐ Unliquidated ☐ Disputed		
✓ Debto	r 1 only			_ Superior		
Debto	•			Type of NONPRIORITY unsecured claim:		
	r 1 and Debtor 2 only st one of the debtors and another	-		Student loans	4 3	
				Obligations arising out of a separation agreement or divorce that you did not report as priority claims	V I	
	k if this claim is for a commu	inity debt		Debts to pension or profit-sharing plans, and other similar debts		
Is the cla ✓ No ☐ Yes	im subject to offset?			☑ Other Specify Credit card		

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Debtor 1

Su	llivan

Case number (if known)_

Part 3:

List Others to Be Notified About a Debt That You Already Listed

then list the collection agency is trying to collect from you	your bankruptcy, for a debt that you already listed in Parts 1 or 2. For our for a debt you owe to someone else, list the original creditor in Parts 1 or e more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claim
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured
	Claims
City State ZIP Code	Last 4 digits of account number
Jame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
tumber Street	Part 2: Creditors with Nonpriority Unsecured Claims
y State ZIP Code	Last 4 digits of account number
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
imber Street	Part 2: Creditors with Nonpriority Unsecured Claims
State ZIP Code	Last 4 digits of account number
ime	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
mber Street	Part 2: Creditors with Nonpriority Unsecured Claims
State ZIP Code  Story of the summarized the summari	Last 4 digits of account number
me	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
umber Street	Claims Part 2: Creditors with Nonpriority Unsecured
y State ZIP Code	Last 4 digits of account number
	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
mber Street	Part 2: Creditors with Nonpriority Unsecured
	Claims

State

ZiP Code

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Debtor 1

Sullivan

Document Hollis

Case number (if known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

fter listing any entries on this page, number them beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
US Bank	Last 4 digits of account number 4 7 7 5	s_9,124.00
Nonpriority Creditor's Name PO Box 790408	When was the debt incurred? 06/01/2013	
Number Street St Louis MO 63179	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	Unliquidated	
Who incurred the debt? Check one.	Disputed	
Debtor 1 only		
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Student loans	
Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit card	
M No	Other. Specify Credit Card	
Yes		
e of a review of the second and the	Last 4 digits of account number	n vitan in provinci in recurring anno anno anno anno anno anno anno an
Nonpriority Creditor's Name	When was the debt incurred?	•
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	-	
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
☐ Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other. Specify	
□ No □ Yes		
NOTIFIE HER FRONT AND	entre de la dicita de la companya dela companya del companya de la companya de la companya de la companya del companya de la companya del companya del companya del companya de la companya del compan	S
Nonpriority Creditor's Name	Last 4 digits of account number	
	When was the debt incurred?	
Number Street	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	Type of NONDPIOPITY upgested delimin	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
•	Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?	Other Specify	
☐ No ☐ Yes		

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Debtor 1

Sullivan First Name

Middle Name

Hollis

Case number (if known)_

10.5 [15]		
	-	

Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this p	page, number th	em beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim	
Synchrony Bank			Last 4 digits of account number 1 5 6 9	_{\$_1,766.00}	
Nonpriority Creditor's Name PO Box 960061			When was the debt incurred? 09/28/2014	<b>V</b>	
Number Street Orlando	EI	22006	As of the date you file, the claim is: Check all that apply.		
City	FL State	32896 ZIP Code	Contingent		
·		23. 0000	Unliquidated		
Who incurred the debt? Check	k one.		Disputed		
Debtor 1 only					
Debtor 2 only			Type of NONPRIORITY unsecured claim:		
Debtor 1 and Debtor 2 only At least one of the debtors and	d another		☐ Student loans		
Check if this claim is for a			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts		
✓ No			Other. Specify Credit card		
Yes					
Synchrony Bank			Last 4 digits of account number 2 1 6 7	\$ <u>1,196.0</u>	
Nonpriority Creditor's Name			When was the debt incurred? 11/25/2008		
PO Box 960061  Number Street			Tricis tras tile dept silvarseus		
Orlando	FL	32896	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	Contingent		
			Unliquidated		
Who incurred the debt? Check	one.		☐ Disputed		
Debtor 1 only					
Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and	i another		Student loans		
			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>		
Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?  ☑ No			Other. Specify Credit card		
Yes					
USAA Credit Card Payn	nents		Last 4 digits of account number 6 6 3 5	\$ 16,166.Q	
Nonpriority Creditor's Name 10750 McDermott Fwy			When was the debt incurred? 01/16/2013		
Number Street San Antonio	TX	78288	As of the date you file, the claim is: Check all that apply.		
City	State	ZIP Code	✓ Contingent		
Who incurred the detail of the			Unliquidated		
Who incurred the debt? Check	one.		☐ Disputed		
Debtor 1 only Debtor 2 only			Time of NONDRIODITY		
Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:		
At least one of the debtors and	another		Student loans		
			Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
Check if this claim is for a	community debt		Debts to pension or profit-sharing plans, and other similar debts		
Is the claim subject to offset?			☑ Other Specify Credit card		
☑ No ☐ Yes					

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Debtor 1

Sullivan First Name

Middle Name

Hollis

Case number (# known)_

Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

r listing any entries on this page, number them beginnin	ng with 4.4, followed by 4.5, and so forth.	Total claim
Goodyear Credit Plan	Last 4 digits of account number 7 0 4 6	s 1,736.0
Nonpriority Creditor's Name PO Box 9001006	When was the debt incurred? 09/20/2013	<u> </u>
Number Street Louisville KY	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	☑ Contingent	
AAN - 1	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only		
Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a community debt	you did not report as priority claims	
Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts  Other. Specify_ Credit card	
₩ No	Other: Specify Orout card	
Yes		
Sears Credit Cards	Last 4 digits of account number 0 4 8 2	\$ 5,421.0
Nonpriority Creditor's Name		<b>₽ 0</b> , ¬ <b>2</b> 1.0
PO Box 78051	When was the debt incurred? 07/28/2013	
Number Street	**************************************	
Phoenix AZ 85062	As of the date you file, the claim is: Check all that apply.	
City State ZIP Code	Contingent	
Who incurred the debt? Check one.	Unliquidated	
Debtor 1 only	☐ Disputed	
Debtor 2 only	<b>*</b>	
Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
At least one of the debtors and another	Student loans	
	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	Other. Specify Credit card	
<b>v</b> No ☑ Yes		
State Farm Bank	Last 4 digits of account number 7 5 7 7	\$ 9,870.00
Vonpriority Creditor's Name		
PO Box 23025	When was the debt incurred? 01/29/2013	
fumber Street Columbus GA 31902	As of the date you file, the claim is: Check all that apply.	
Columbus         GA         31902           Oity         State         ZIP Code		
. Solo ZIF Code	<ul><li>✓ Contingent</li><li>☐ Unliquidated</li></ul>	
Vho incurred the debt? Check one.	Disputed	
Debtor 1 only	— Disputed	
Debtor 2 only	Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	☐ Student loans	
At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a community debt	you did not report as priority claims	
·	Debts to pension or profit-sharing plans, and other similar debts	
s the claim subject to offset?	☑ Other, Specify Credit card	
<b>₫</b> No		

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Debtor 1

Sullivan

Case number (if known)_

Part 4:

Add the Amounts for Each Type of Unsecured Claim

Last Name

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

				Total claim	
Total claims from Part 1				\$	0.00
	6b	. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6с	. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d	. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+ \$	0.00
	6e	. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	0.00
				Total claim	
Total claims	6f.	Student loans	6f.	\$	0.00
from Part 2	6g.	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	<b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$ 74,	218.00
	6j. <b>Total.</b> Add lines 6f through 6i.		6j.	s 74,	218.00

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Fil	ll in this ir	nformation to i	dentify your	case:				
De	ebtor	Sullivan			Hollis			
	ebtor 2	First Name	Mi	ddie Name	Last Name			
	ouse If filing)			ddle Name	Last Name			
		Bankruptcy Court	for the: North	ern District of Illino	is	Ī		
	ise number known)							Check if this is an
<b>L</b>	<del></del>		· · · · · · · · · · · · · · · · · · ·					amended filing
Of	ficial F	orm 106	iG					
	•			ory Conti	racts and	Une	expired Leases	12/15
info addi	mation, litional pag  Do you h  No. C	f more space in ges, write your ave any execu heck this box a	s needed, co name and c story contrac nd file this for	py the additional ase number (if kn ts or unexpired le m with the court w	page, fill it out, nu nown). eases? ith your other sched	imber the	poth are equally responsible for sign of the entries, and attach it to this page at the entries, and attach it to this page at the entries at	e. On the top of any
2.	List sepa	rately each pe rent, vehicle i	rson or com	pany with whom	you have the contr	act or lea	ase. Then state what each contrac struction booklet for more examples	t or lease is for /for
	Person o	r company wit	h whom you	have the contrac	t or lease	:	State what the contract or lease is	s for
2.1	PNC B	ank				2010	Ford Edge	
	Name PO Box	(3180					1 0.0 Eugo	
	Number	Street	F) A	45000		<del>.</del>		
	Pittsbur City	gn	PA State	15230 ZIP Code				
2.2	alle en tre en alle et tre avant a van alle alte alte		* *************************************	er er tre er er er tre enneten vegennigen, om generale	***************************************			ek errek elementek er lekkek kommunen kommunen er en
	Name					•		
	Number	Street				-		
	City		State	ZIP Code				
2.3				A.S.1	e de estampojamento		territoria (1916) e de la companiona de la	teritaria de la terrata de la composição d
	Name				<u> </u>			
	Number	Street						
	City		State	ZIP Code	***************************************			
2.4			Olate	Zii Code			e e e e e e e e e e e e e e e e e e e	er etanke er stere et konstruit vist stats om er en stad en er stade en en sjegen en en en en en en en en en e
	Name							
	Number	Street	<del></del>	······································		<u>.</u>		
	~							
2.5	City		State	ZIP Code				
	Name				RADE LEAVE TO THE REAL PROPERTY OF THE PARTY			
	Number	Street						
	City		State	ZIP Code				

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311	in this	information to ide	entify your case:				
Del	btor 1	Sullivan		Hollis			
Del	btor 2	First Name	Middle Name	Last Name			
		1g) First Name	Middle Name	Last Name			
Uni	ted State	s Bankruptcy Court fo	r the: Northern District of I	llinois	***************************************		
	se numbe	er					
(If k	(NOWN)						Check if this is an
							amended filing
Off	ficial	Form 106H	+				
Sc	hed	lule H: Yo	 our Codebto	re			12/15
are nand i case	ining tog number number Do you No Yes Within t Arizona, You Yes.	the entries in the er (if known). Answ have any codebto the last 8 years, h. California, Idaho, Go to line 3. Did your spouse, No Yes. In which common the common spouse, for the common the common than the common that the c	qually responsible for suboxes on the left. Attacker every question.  The series of the left of the le	ipplying correct inform the Additional Page to the Additional Page t	ation. If more space this page. On the spouse as a code territory? (Commas, Washington, as the time?  Fill in the	unity property states and territories nd Wisconsin.)  name and current address of that	al Page, fill it out, rite your name and include person.
5	shown i Sc <i>hedul</i>	in line 2 again as a le D (Official Form	codebtor only if that pe	erson is a guarantor or	cosigner. Make s	pouse is filing with you. List the ure you have listed the creditor o cial Form 106G). Use <i>Schedule D</i>	· on
	Column	1: Your codebtor	•		Co	lumn 2: The creditor to whom yo	u owe the debt
					С	neck all schedules that apply:	
3.1					_	Cohodula D. Iina	
	Name					Schedule D, line	
	Number	Street				Schedule G, line	
	City		Olass			- CONOCIC O, MIC	
3.2	City		State	ZIP (	Code		1
	Name		***************************************		C	Schedule D, line	
						Schedule E/F, line	
	Number	Street				Schedule G, line	
<del></del> ,	City		State	ZIPC	Code		
3.3							
	Name	**************************************				Schedule D, line	
	Number	Street				Schedule E/F, line	•
	-		VA-11-			Schedule G, line	:
	City		State	ZIP C	ode		j

Official Form 106H

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Fill in this in	formation to identify	your case:						
Debtor 1	Sullivan		Hollis					
Debtor 2	First Name	Middle Name	Last Name					
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States I	Bankruptcy Court for the:	Northern District of Illinois						
Case number (If known)						Check if	this is:	
							mended filing	
Official Co	10Cl						oplement showing postpetition one as of the following date:	chapter 13
Official Fo						MM /	DD / YYYY	
Sched	ule I: You	ır Income						12/15
supplying cor If you are sepa separate shee	rect information. If ye arated and your spot	ou are married and not fi use is not filing with you, top of any additional pa	ling jointly, and ye do not include in	our si forma	ouse is livition about	ring with Lyour sno	tor 2), both are equally responsil you, include information about y ouse. If more space is needed, a known). Answer every question.	our spouse.
Fill in your information			Debtor 1				Debtor 2 or non-filing spou	ise
	more than one job,						ANDERSON AND AND AND AND AND AND AND AND AND AN	
	parate page with about additional	Employment status		/ed			☐ Employed ☐ Not employed	
include part self-employ	t-time, seasonal, or							
Occupation	may include student ker, if it applies.	Occupation	Bus Operato	r Pa	t time			
		Employer's name	Chicago Trai	nsit A	Authority		•	
		Employer's address	624 N Pulasi Number Street	Kİ			Number Street	
			Chicago	Sta		60624	City State ZI	P Code
		How long employed the	ŕ	0.0	oo		Only State 21	Code
Part 2: G	iive Details About	Monthly Income					And the state of t	
spouse unle	ss you are separated. Ir non-filing spouse ha	•	er, combine the info				rite \$0 in the space. Include your n	on-filing
					For De	btor 1	For Debtor 2 or non-filing spouse	
List month deductions	ily gross wages, sala ). If not paid monthly,	iry, and commissions (be calculate what the monthly	efore all payroll wage would be.	2.	\$ 2,8	45.00	\$	
3. Estimate a	nd list monthly over	time pay.		3.	+\$	0.00	+ \$	
4. Calculate (	gross income. Add lin	ne 2 + line 3.		4.	\$2,84	45.00	\$	

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Debtor 1	Sulliva First Name	Middle Name	Hollis Last Name			Case number (#.	known)	
					F	or Debtor 1	For Debtor 2 or non-filing spous	<b>e</b>
Cop	y line 4 here.	***************************************		<b>→</b> 4.	\$	2,845.00	\$	ADV
5. List	all payroll de	ductions:						
5a.	Tax Medica	re, and Social Secu	rity deductions	5a	. \$	380.00	œ.	
		ontributions for ret		5b		0.00	-	
		ontributions for retir		5c		^ ^^		
		payments of retirem		5d	٠.			
	Insurance	-		5e		260.00		
5f.	Domestic su	pport obligations		5f.	\$	0.00	· · · · · · · · · · · · · · · · · · ·	
5g.	Union dues			5g.	\$	75.00		
5h.	Other deduc	tions. Specify:		5h.		0.00		
			s 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h		\$_	715.00	\$	
7. Cal	iculate total m	onthly take-home p	ay. Subtract line 6 from line 4.	7.	\$_	2,130.00	\$	
8. List	all other inco	me regularly receiv	ed:					
		rom rental property	and from operating a business,					
	Attach a state receipts, ordir monthly net in	ary and necessary b	ty and business showing gross usiness expenses, and the total	8a.	\$_	0.00	\$	
8b.	Interest and			8b.		0.00	\$	
8c.	Family support	ort payments that yo	ou, a non-filing spouse, or a depende		Ψ		Ψ	
	Include alimor		child support, maintenance, divorce t.	8c.	\$_	0.00	\$	_
		nt compensation		8d.	\$_	0.00	\$	_
8e.	Social Securi	ty		8e.	\$_	0.00	\$	
	Include cash a that you receive	issistance and the va	at you regularly receive lue (if known) of any non-cash assistan ips (benefits under the Supplemental ousing subsidies.	ice 8f.	\$	0.00	\$	
8a	Pension or re	tirement income			-		Y	<b></b>
				8g.	\$	2,800.00	\$	
				8h.	+\$_	0.00	+\$	<del></del>
			3b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_	2,800.00	\$	
10. Caicu Add 1	ulate monthly the entries in li	<b>income</b> . Add line 7 the 10 for Debtor 1 and	r line 9. ad Debtor 2 or non-filing spouse.	10.	\$_	4,930.00	<b>+</b> \$ 0.00	<b>=</b> \$ 4,930.00
Includ friend	de contribution ds or relatives.	s from an unmarried	the expenses that you list in Sched partner, members of your household, y	our d	epend			
			uded in lines 2-10 or amounts that are r					/. 1. <b>+</b> \$0.00_
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.  Write that amount on the Summary of Your Assets and Liabilities and Certain Statistical Information, if it applies  12. \$4,930.00 Combined								
<b>62</b> 1	No.	increase or decreas	se within the year after you file this fo	orm?				monthly income
	res. Explain:							

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Fill	n this information to identify	your case:			
Debt		Hollis Lock Name	Check if th	is is:	
	or 2		D An ame	ended filing	
` `			☐ A supp	lement showing pos	
Unite	d States Bankruptcy Court for the:	Northern District of Illinois	expens	es as of the followin	ig date:
			MM / DI	O / YYYY	
Offi	cial Form 106J				
Sc	hedule J: Yo	ur Expenses			12/15
inforn	Test Name   Malab have   Destroy   Part Name   Destroy   Part Name   Destroy   Destroy				
Part	A Describe Your Hou	sehold			
1. Is ti	nis a joint case?				
,	+ + + + + + + + + + + + + + + + +	separate household?			
	☐ No				
	Yes. Debtor 2 must file	e Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
Do	not list Debtor 1 and	Yes. Fill out this information for	Debtor 1 or Debtor 2	•	
		each dependent		15	
	•		*		
			Grandson		
				***	
			<del></del>		
					☐ No
					☐ Yes
exp	enses of people other than				
Part 2	Estimate Your Ongoi	ng Monthly Expenses			
expen	ses as of a date after the ban			•	•
	• •	•		Vaurava	0,000
		,	·	newayawayayayayayayaya	BREWALLATTA TO A TO A TO A TO A TO A TO A TO
	•	expenses for your residence. Include	nist mongage payments and	4. \$	1,850.00
					0.00
4a. 4b.	Property, homeowner's, or n	enter's insurance			65.00
40. 4c.	Home maintenance, repair,			4b. \$ 4c. \$	100.00
4d.		, , ,		4d. \$	0.00

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Debtor 1 Sullivan Hollis Case number (# known)______

			Your expenses	
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$	0.00
6.	Utilities:			
	6a. Electricity, heat, natural gas	6a.	\$	350.00
	6b. Water, sewer, garbage collection	6b.	\$	
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	
	6d. Other. Specify:	6d.	\$	
7.		7.	\$	450.00
8.	Childcare and children's education costs	8.	\$	250.00
9.	Clothing, laundry, and dry cleaning	9.	\$	
10.	Personal care products and services	10.	\$	400.00
11,	Medical and dental expenses	11.	\$	
12.	Transportation. Include gas, maintenance, bus or train fare.			0.50
	Do not include car payments.	12.	\$	250.00
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
14.	Charitable contributions and religious donations	14.	\$	0.00
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insurance	15a.	\$	0.00
	15b. Health insurance	15b.	\$	0.00
	15c. Vehicle insurance	15c.	\$	
	15d. Other insurance. Specify:	15d.	\$	0.00
16.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$	0.00
17.	Installment or lease payments:			
	17a. Car payments for Vehicle 1	17a.	\$	520.00
	17b. Car payments for Vehicle 2	17b.	\$	
	17c. Other. Specify:	17c.	\$	
	17d. Other. Specify:	17d.	\$	
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	18.		
19.	Other payments you make to support others who do not live with you.		Ψ	
	Specify:	19.	\$	
	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	1e.		And the second s
	20a. Mortgages on other property	20a.	\$	
	20b. Real estate taxes	20b.		
	20c. Property, homeowner's, or renter's insurance	20c.		
	20d. Maintenance, repair, and upkeep expenses	20d.		
	20e. Homeowner's association or condominium dues	20e.		

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Debtor 1	Sullivan First Name Middle Name	Hollis Last Name	Case number (if known)		
21. Other.	Specify:		2	1. <b>+</b> \$	0.00
22. Calcul	ate your monthly expenses.			1000 100 100 100 100 100 100 100 100 10	11 manuar 114 may 1 144/20 /4 (1/2 m/2 s/1 m/2
22a. A	dd lines 4 through 21.		22a	- S	4,905.00
22b. C	opy line 22 (monthly expenses f	or Debtor 2), if any, from Official Form 1	06J-2 22b	· \$	0.00
22c. A	dd line 22a and 22b. The result i	s your monthly expenses.	220	· \$	4,905.00
23. Calcula	te your monthly net income.				
23a. C	opy line 12 (your combined mon	thly income) from Schedule I.	238	s	4,930.00
23b. C	opy your monthly expenses fron	line 22c above.	235	· \$	4,905.00
	ubtract your monthly expenses fine result is your monthly net inco	,	<b>2</b> 3c	\$	25.00
24. Do you	expect an increase or decreas	e in your expenses within the year a	fter you file this form?		
		ring for your car loan within the year or one of the terminate of a modification to the terminate the terminate of the termin			
☑ No. ☐ Yes.	Explain here:				

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Fill in this i	nformation to iden	tify your case:			
Debtor 1	Sullivan		Hollis		
Debtor 2		Middle Name	Last Name	_	
(Spouse, if filing		Middle Name the: Northern District of Illi	Last Name		
Case number		ale. Notthern District of the			
(If known)					☐ Check if this is a
				and the state of t	amended filing
Officia	al Form 106	:Doc			
		<del></del>		Nobitovio Cobodilio	
Dec	iaration	Apout an I	naiviauai L	ebtor's Schedules	12/15
If two ma	rried people are fili	ing together, both are eq	ually responsible for su	pplying correct information.	
Did yo	Sign Below	152, 1341, 1519, and 357		u fill out bankruptcy forms?	
<b>∐</b> Ye	s. Name of person_			Attach Bankruptcy Petition Preparer's Notice, Declarations Signature (Official Form 119).	ation, and
that th	penalty of perjury ney are true and co	rrect.	d the summary and sch	edules filed with this declaration and	
	ture of Debtor 1		Signature of Debto	12	
Date _	02/13/20.	17	Date	<del>////</del>	

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Fill in this informa	tion to identify	your case:				
Debtor 1 Sulliv		Middle Name	Hollis Last Name	and a distribution of the second second second		
Debtor 2 (Spouse, if filing) First Nar	36	Middle Name	Last Name			
United States Bankrup	tcy Court for the:	Northern District of				
Case number			Market Anna Anna Anna Anna Anna Anna Anna Ann			
						Check if this is an amended filing
Official Form	107					
Statement	of Finan	cial Affai	rs for Indiv	iduals Filing	for Bankrupto	<b>y</b> 04/16
e as complete and	accurate as pos	ssible. If two mar	ried people are filin	g together, both are equ	ally responsible for suppl ditional pages, write your	ying correct
umber (if known). A	Inswer every qu	estion.	are slight to this lot	m. On the top of any ad	ditional pages, write your	name and case
Part 1: Give Do	etails About Y	our Marital Sta	itus and Where Y	ou Lived Before		
1. What is your cut	rent marital sta	tus?				
Married  Not married						
- Hormanica						
2. During the last 3 No Yes. List all o			years. Do not include			
Debtor 1:			Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
				Same as Debtor 1		Same as Debtor 1
Number	Street		From	Number Street		From
			То	Number Street		To
	W		•	Administrative and the second		
City	5	State ZIP Code	•	City	State ZIP Code	
				Same as Debtor 1		☐ Same as Debtor 1
Number	Street		From	Number Street	***************************************	From
(14.11.2)	0.1000		To	Number Street		To
***************************************	**************************************					
City	S	tate ZIP Code	-	City	State ZIP Code	
3. Within the last 8	years, did you e	ever live with a sp	ouse or legal equiv	alent in a community or	operty state or territory?	Community property
states and territor  No	es include Arizo	na, California, Idal	no, Louisiana, Nevad	a, New Mexico, Puerto Ri	ico, Texas, Washington, and	d Wisconsin.)
	e you fill out <i>Sch</i>	nedule H: Your Co	debtors (Official Form	106H).		
				•		
		Your Income				

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Debtor 1	Sullivan	Hollis	Cose n	ımber (if known)	
	First Name Middle Name La	ist Name		arraber (ir known)	
lf y	I you have any income from employment in the total amount of income you receive ou are filing a joint case and you have in No Yes. Fill in the details.	ed from all jobs and all bu	isinesses, including part-ti	me activities.	endar years?
_	res. This is the details.	Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross Income (before deductions and exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions bonuses, tips  Operating a busines	\$ 3,875.00	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$
	For last calendar year: (January 1 to December 31, 2016	Wages, commissions bonuses, tips  Operating a busines	\$44,000.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
	For the calendar year before that: (January 1 to December 31, 2014	Wages, commissions bonuses, tips  Operating a business	s 41.000.00	Wages, commissions, bonuses, tips Operating a business	\$
unei gam List		ments; pensions; rental in g a joint case and you ha	come; interest; dividends; ve income that you receive	money collected from laws ed together, list it only once	uits: rovalties: and
ا ليبا	Yes. Fill in the details.	Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
	From January 1 of current year until	Pension	\$4,000.00		\$
	the date you filed for bankruptcy:	Pension	\$1,600.00		\$
			\$		\$
	For last calendar year:	Pension	s 24,000.00		
	(January 1 to December 31, 2016)	Pension B	\$ 9,600.00		_
			Ψ -,,,,,,		\$
	YYYY	No. of Control of Cont	\$		\$ \$ \$
	For the calendar year before that:	Pension	***************************************		\$ \$ \$
	For the calendar year before that: (January 1 to December 31, 2014	Pension Pension	\$		***************************************

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Debtor 1	Sullivan		Hollis	Case	number (if known)	
	First Name Middle Name	Last Name		-	(A.	
and the state lines						
Part 3:	List Certain Payments Y	ou Made Befo	re You Filed	for Bankruptcy		
	ther Debtor 1's or Debtor 2's (					
☐ No	<ul> <li>Neither Debtor 1 nor Debto "incurred by an individual printing."</li> </ul>	naniy for a perso	nal, tamily, or l	nousehold purpose."		1(8) as
	During the 90 days before yo	u filed for bankru	ptcy, did you p	ay any creditor a total o	f \$6,425* or more?	
	No. Go to line 7.					
	Yes. List below each cred total amount you pai child support and ali	id that creditor. D	o not include n	\$6,425* or more in one ayments for domestic sometis to an attorney for	unnort obligations, such as	
	* Subject to adjustment on 4/	01/19 and every :	B years after th	at for cases filed on or	after the date of adjustment.	
☐ Ye	s. Debtor 1 or Debtor 2 or bot				•	
	During the 90 days before yo				SSGO or more?	
	☐ No. Go to line 7.	·	, , , , , , , , , , , , , , , , , , ,	.,,	quad at moto.	
	Yes. List below each cred creditor. Do not inclualimony. Also, do no	ide payments for	uumesiic suon	\$600 or more and the to ort obligations, such as by for this bankruptcy ca	child support and	
			Dates of payment	Total amount paid	Amount you still owe	Was this payment for
				\$	\$	☐ Mortgage
	Creditor's Name					Car
	Number Street					Credit card
						Loan repayment
						Suppliers or vendors
	City State	ZIP Code				Other
	, 5.4.5	2000				
				\$	\$	Modago
	Creditor's Name			\$	\$	☐ Mortgage
				\$	\$	Car
	Creditor's Name  Number Street			\$	\$	Car
				\$	\$	Car Credit card Loan repayment
	Number Street	710 Code		\$	\$	Car Credit card Loan repayment Suppliers or vendors
		ZIP Code		\$	\$	Car Credit card Loan repayment
	Number Street	ZIP Code		\$	\$	Car Credit card Loan repayment Suppliers or vendors
	Number Street  City State	ZIP Code		\$\$	\$\$	Car Credit card Loan repayment Suppliers or vendors
	Number Street	ZIP Code				Car Credit card Loan repayment Suppliers or vendors Other
	Number Street  City State	ZIP Code				Car Credit card Loan repayment Suppliers or vendors Other Mortgage
	Number Street  City State  Creditor's Name	ZIP Code				Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car
	Number Street  City State  Creditor's Name	ZIP Code				Car Credit card Loan repayment Suppliers or vendors Other Mortgage Car Credit card

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stor 1	Sullivan		Hollis		Case number (if known	a.
	First Name Middle Name	Last Name	, , , , , , , , , , , , , , , , , , ,	<del>de</del>	·	·
Inside corpo agen such	orations of which you are ar it, including one for a busing as child support and alimo	iny general partners; in officer, director, persess you operate as a sensy.	relatives of any son in control, o	general partners; or owner of 20% or	partnerships of white more of their voting	who was an insider?  ch you are a general partner; g securities; and any managing or domestic support obligations,
LIY	es. List all payments to an	insider.	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name			\$	\$	
	Number Street	**************************************				
	City	State ZIP Code	emana			*
	O.Y	State 2.17 (Jude		\$	\$	
	Insider's Name  Number Street					
î	City	State ZIP Code				
nciud	sider? de payments on debts guara	anteed or cosigned by		ayments or trans Total amount paid	Amount you still	n account of a debt that benefited  Reason for this payment  Include creditor's name
Ī	Insider's Name		***************************************	\$	_ \$	
Ī	Number Street	***************************************	After the different feature of the constitution of the constitutio			
7	City	State ZIP Code	A Property of the State of the			
				\$	\$	
Ĩ	nsider's Name			**************************************	T	
ī	Number Street					
-						
C	City	State ZIP Code				

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ebtor 1	Sullivan		Hollis	Case number (if kn		
	First Name Middle Name	Last Name		Case Humber (if kin	own)	
Part 4:	Identify Legal Actio	ns. Rannesassi	one and Forcelos.	<b>T</b> 00		
	· · · · · · · · · · · · · · · · · · ·					
List al	such matters, including n	ersonal injury case	ere you a party in any	lawsuit, court action, or additionation divorces, collection suits, pat	ninistrative proc	eeding?
and co	ontract disputes.	orderial injury edec	o, other claims actions,	divorces, conection suits, pat	ernity actions, sup	port or custody modification
M No	•					
	s. Fill in the details.					
		Mass	re of the case			
		Matt	ne of the case	Court or agency		Status of the case
c	ase title	•				rn.
	ase me			Court Name	***************************************	Pénding
_						On appeal
				Number Street		Concluded
С	ase number			•		
				City S	ate ZIP Code	
C	ase title			Court Name		Pending
				OUNTERNO		On appeal
*****				Number Street		Concluded
C	ase number			· Office		Concluded
٠,				City St	ate ZIP Code	
			Describe the prope	<b></b>	<b></b>	
			Describe the proper	ity The state of the state of t	Date	Value of the property
	Creditor's Name					\$
	Groundr's Hanne				**************************************	¥
	Number Street		Explain what happe	ned		
			Property was	rannecaerad		
			Property was			
			Property was			
	City	State ZIP Code		attached, seized, or levied.		
	•	•	Describe the proper	* * * * * * * * * * * * * * * * * * *		
			baseline die proper	ıy	Date	Value of the property
						_
	Creditor's Name		<del></del>			\$
	Number Street					
			Explain what happer	ned		
			Property was r	epossessed.		
			Property was f	•		
	City	State ZIP Code	Property was g			
			Property was a	ittached, seized, or levied.		

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	Sullivan First Name	Middle Name	Last Name	Hollis	0	ase number (if known)		
		Middle Hanne	Fast MSIII	e e				
lithi cou	n 90 days befo	ore you filed for	bankruptc	y, did any creditor, se you owed a deb	including a bank or	r financial institu	tion, set off any a	mounts from you
I N	circs or retuse	to make a paym	ient becau	se you owed a deb	it?			
	o es. Fill in the de	staile						
,	oo. 1 111 111 the GC	idno.						
77	editor's Name		i	Describe the action th	he creditor took		Date action was taken	Amount
CIE	ediloi s Name						• • •	
Nu	mber Street							\$
	***************************************							
City	V	State ZIP	Code I	and distribute of a constant				
	,	Oldic Zii	Code [	ast 4 digits of accou	unt number: XXXX			
thin	1 1 year before	you filed for ba	nkruptcy,	was any of your pro	operty in the posses	ssion of an assig	nee for the benef	fit of
-GIU	ors, a court-ap	pointed receive	r, a custod	lian, or another off	icial?			
No								
Ye	S							
<b>51</b> .	Link Contain	. 6:55						
	LIST Certain	Gifts and Co	ntribution	ns				
hin	2 years before	you filed for ba	ankruptcy,	did you give any g	ifts with a total valu	e of more than \$	600 per person?	
Νo				did you give any g	ifts with a total valu	e of more than \$	500 per person?	
Νo		e you filed for ba		did you give any g	ifts with a total valu	e of more than \$6	500 per person?	
No Yes	s. Fill in the det	ails for each gift.		did you give any g	iifts with a total valu	e of more than \$6	500 per person?	
No Yes Gi	s. Fill in the det			did you give any g	iifts with a total valu	e of more than \$6	Dates you gave	Value
No Yes Gi	s. Fill in the det	ails for each gift.			ifts with a total valu	e of more than \$6	Dates you gave the gifts	Value
No Yes Gi pe	s. Fill in the det ifts with a total v er person	ails for each gift.					Dates you gave the gifts	Value
No Yes Gi pe	s. Fill in the det	ails for each gift.					Dates you gave the gifts	Value \$
No Yes Gi pe	s. Fill in the det ifts with a total v er person	ails for each gift.					Dates you gave the gifts	
No Yes Gi pe	s. Fill in the det ifts with a total v er person	ails for each gift.					Dates you gave the gifts	
No Yes Gi pe	s. Fill in the det ifts with a total v or person	ails for each gift.					Dates you gave the gifts	\$
Ves Gi pe	s. Fill in the det ifts with a total v or person	ails for each gift.					Dates you gave the gifts	\$
Ves Gi pe	s. Fill in the det ifts with a total v or person	ails for each gift.  alue of more than  ave the Gift	\$600 D				Dates you gave the gifts	\$
No Yes Gi pe	s. Fill in the det ifts with a total ver person on to Whom You G	ails for each gift.  ralue of more than  ave the Gift  State ZIP C	\$600 D				Dates you gave the gifts	\$
No Yes Gi pe	s. Fill in the det ifts with a total v or person	ails for each gift.  ralue of more than  ave the Gift  State ZIP C	\$600 D				Dates you gave the gifts	\$
Pers  Rumi City	s. Fill in the det  ifts with a total v  er person  on to Whom You Go  ber Street	ails for each gift.  alue of more than  ave the Gift  State ZIP C	\$600 D				Dates you gave the gifts	\$
No Yes Gi pe Pers Numi	s. Fill in the det  ifts with a total v  er person  on to Whom You Gi  ber Street  son's relationship	ails for each gift.  ralue of more than  ave the Gift  State ZIP C	\$600 D				Dates you gave the gifts	\$
No Yes Gi pe Pers Numi	s. Fill in the det  ifts with a total v  er person  on to Whom You Go  ber Street	ails for each gift.  alue of more than  ave the Gift  State ZIP C	\$600 D	escribe the gifts			Dates you gave the gifts	\$ \$
No Yes Gi pe Pers Numi	s. Fill in the det  ifts with a total v  er person  on to Whom You Gi  ber Street  son's relationship	ails for each gift.  alue of more than  ave the Gift  State ZIP C	\$600 De	escribe the gifts			Dates you gave the gifts	\$ \$
No Yes Gi pe Pers Numi	s. Fill in the det  ifts with a total v  er person  on to Whom You Gi  ber Street  son's relationship	ails for each gift.  alue of more than  ave the Gift  State ZIP C  to you  ue of more than \$6	\$600 De	escribe the gifts			Dates you gave the gifts	\$ \$
No Yes Gi pe Pers Numi	s. Fill in the det ifts with a total v er person con to Whom You G ber Street con's relationship s with a total val-	ails for each gift.  alue of more than  ave the Gift  State ZIP C  to you  ue of more than \$6	\$600 De	escribe the gifts			Dates you gave the gifts	\$\$ \$Value
No Yes Gi pe Pers Numi	s. Fill in the det ifts with a total v er person con to Whom You G ber Street con's relationship s with a total val-	ails for each gift.  alue of more than  ave the Gift  State ZIP C  to you  ue of more than \$6	\$600 De	escribe the gifts			Dates you gave the gifts	\$\$ \$Value
No Yes Gi pe Pers Numi	s. Fill in the det ifts with a total v er person con to Whom You G ber Street con's relationship s with a total val-	ails for each gift.  alue of more than  ave the Gift  State ZIP C  to you  ue of more than \$6	\$600 De	escribe the gifts			Dates you gave the gifts	\$
No Yes Gi pe Pers Numi	s. Fill in the det ifts with a total v er person  con to Whom You G  son's relationship s with a total val person  on to Whom You Ga	ails for each gift.  alue of more than  ave the Gift  State ZIP C  to you  ue of more than \$6	\$600 De	escribe the gifts			Dates you gave the gifts	\$
No Yes Gi pe Pers Numi City Pers Gifts per	s. Fill in the det ifts with a total v er person con to Whom You G con's relationship s with a total val- person on to Whom You Ga	ails for each gift.  alue of more than  ave the Gift  State ZIP C  to you  ue of more than \$6	\$600 De	escribe the gifts			Dates you gave the gifts	\$
No Yes Gi pe Pers Numi City Pers Gifts per	s. Fill in the det ifts with a total v er person con to Whom You G con's relationship s with a total val- person on to Whom You Ga	ails for each gift.  alue of more than  ave the Gift  State ZIP C  to you  ue of more than \$6	\$600 De	escribe the gifts			Dates you gave the gifts	\$

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or 1	Sullivan First Name Middle Name	Hollis Case n	umber (if known)	
		EWAT HURLE		
Viti	hin 2 years before you filed for ban	skruptcy, did you give any gifts or contributions wit	h a total value of more than	\$600 to any charity?
2	No		To an value of more anali	poor to any charity
	Yes. Fill in the details for each gift or	contribution.		
	Gifts or contributions to charities that total more than \$600	Describe what you contributed	Date you contributed	Value
			to the second	
7	Charity's Name	THE PROPERTY OF THE PROPERTY O		\$
				-
-		The state of the s	**************************************	\$
-				
P	Number Street			
_			4 :	
C	City State ZIP Code			
6:	List Certain Losses			
	1993			
!	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pendir	Date of your loss	Value of property lost
		claims on line 33 of Schedule A/B: Property.	<b>3</b>	
			:	\$
				Ψ
			•	
<b>7</b> :	List Certain Payments or Tra			
	Auguren anont seekuig ballklifbli	uptcy, did you or anyone else acting on your behalf ry or preparing a bankruptcy petition?		y to anyone
lud	le any attorneys, bankruptcy petition	preparers, or credit counseling agencies for services re	quired in your bankruptcy.	
No				
Ye	es. Fill in the details.			
P	erson Who Was Paid	Description and value of any property transferred	Date payment or transfer was	Amount of payment
•		and the state of t	made	
N	umber Street	-	· ************************************	\$
_		_		
~	ity State ZIP Code	-	- Third Arrange and the Art	\$
U	ity State ZIP Code			
Er	mail or website address			
Pe	erson Who Made the Payment, if Not You		•	
	.,,			

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	First Name Middle Name Las	Name	Case number (if known)		
		Description and value of any propert	ty transferred	Date payment or	Amount of
			,	transfer was made	payment
	Person Who Was Paid				
	Number Street				\$
	Number Street				e.
					Φ
	City State ZIP Code				
	=				
	Email or website address	···			
			:		
	Person Who Made the Payment, if Not You				
ZÍ N	ot include any payment or transfer that y io es. Fill in the details.	ou notice by mile 10.			
······l Y	es. Fill in the details.				
		Description and value of any property	/ transferred	Date payment or transfer was	Amount of pay
•	Person Who Was Paid			made	
	Number Street				\$
					Φ
-				PANATur Transcore and American Impublic	3
-					\$
Withi	City State ZIP Code n 2 years before you filed for bankrup	tcy, did you sell, trade, or otherwise	e transfer any property to		\$
<b>Vithi</b> ransi nclud Dono <b>Vi</b> No	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers no t include gifts and transfers that you have	ousiness or financial affairs? nade as security (such as the granting		anyone, other than	\$n property
Vithia ransi nclud Do no Vi	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your l le both outright transfers and transfers m of include gifts and transfers that you have	Dusiness or financial affairs?  nade as security (such as the granting re already listed on this statement.  Description and value of property transferred	of a security interest or mo  Describe any property or debts paid in exchange	anyone, other that rtgage on your prop	\$n property perty).
Vithing ransing look of the lo	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your l le both outright transfers and transfers m of include gifts and transfers that you have	ousiness or financial affairs?  nade as security (such as the granting  ve already listed on this statement.  Description and value of property	of a security interest or mo	anyone, other that rtgage on your prop	\$n property perty).  Date transfe
Vithi rans noclud Do no Ž No 1 Y∈	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers in t include gifts and transfers that you have es. Fill in the details.	Dusiness or financial affairs?  nade as security (such as the granting re already listed on this statement.  Description and value of property transferred	of a security interest or mo  Describe any property or debts paid in exchange	anyone, other that rtgage on your prop	\$n property perty).  Date transfe
Vithi rans noclud Do no Ž No P	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers m t include gifts and transfers that you hav o es. Fill in the details.	Dusiness or financial affairs?  nade as security (such as the granting re already listed on this statement.  Description and value of property transferred	of a security interest or mo  Describe any property or debts paid in exchange	anyone, other that rtgage on your prop	\$n property perty).  Date transfe
Vithing ransing ransin	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers in to include gifts and transfers that you have bes. Fill in the details.  Person Who Received Transfer	Dusiness or financial affairs?  nade as security (such as the granting re already listed on this statement.  Description and value of property transferred	of a security interest or mo  Describe any property or debts paid in exchange	anyone, other that rtgage on your prop	\$n property perty).  Date transfe
Vithing rans included to the control of the control	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers m of include gifts and transfers that you have oes. Fill in the details.  Person Who Received Transfer  Jumber Street  State ZIP Code	pusiness or financial affairs?  nade as security (such as the granting ve already listed on this statement.  Description and value of property transferred	of a security interest or mo  Describe any property or debts paid in exchange	anyone, other than	n property perty).  Date transfe was made
Vithing ransing local No.	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers in to include gifts and transfers that you have bes. Fill in the details.  Person Who Received Transfer	pusiness or financial affairs?  nade as security (such as the granting ve already listed on this statement.  Description and value of property transferred	of a security interest or mo	anyone, other that	n property perty).  Date transfe was made
Vithing ransing the control of the c	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers m of include gifts and transfers that you have oes. Fill in the details.  Person Who Received Transfer  Jumber Street  State ZIP Code	pusiness or financial affairs?  nade as security (such as the granting ve already listed on this statement.  Description and value of property transferred	of a security interest or mo  Describe any property or or debts paid in exchang	anyone, other that	n property perty).  Date transfe was made
Vithin ransin nelud Do no	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers m at include gifts and transfers that you have courses. Fill in the details.  Person Who Received Transfer  Tumber Street  State ZIP Code  Person's relationship to you	pusiness or financial affairs?  nade as security (such as the granting ve already listed on this statement.  Description and value of property transferred	of a security interest or mo	anyone, other that	n property perty).  Date transfe was made
Vithin ransin nelud Do no	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers in the include gifts and transfers that you have obes. Fill in the details.  Person Who Received Transfer  Jumber Street  Person's relationship to you	pusiness or financial affairs?  nade as security (such as the granting ve already listed on this statement.  Description and value of property transferred	of a security interest or mo	anyone, other that	n property perty).  Date transfe was made
Vithing ransing ransin	City State ZIP Code  n 2 years before you filed for bankrup ferred in the ordinary course of your I le both outright transfers and transfers in the include gifts and transfers that you have obes. Fill in the details.  Person Who Received Transfer  Jumber Street  Person's relationship to you	pusiness or financial affairs?  nade as security (such as the granting ve already listed on this statement.  Description and value of property transferred	of a security interest or mo	anyone, other that	n property perty).  Date transfe was made

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M No	o	bankruptcy, did you transfer any prope alled asset-protection devices.)	Case number (##		which you
M No	o	bankruptcy, did you transfer any prope alled asset-protection devices.)	rty to a self-settled tru	ust or similar device of	which you
M No	o	bankruptcy, did you transfer any prope alled asset-protection devices.)	erty to a self-settled tru	ust or similar device of	which you
V No	)	alled asset-protection devices.)			
	s. Fill in the details.				
		Description and value of the prop			Date transfer was made
					THE ITEM
Nam	me of trust	ritron was assessed.			
			Production and the comment of the contract of	ingenegation), near this regarder measurement of a site activity of activity of institution when this site, in a site, in	annele a theories of anneles of the other than the second section of the second of the second of the second of
		ounts, instruments, Safe Deposit			
/ithin '	1 year before you filed for bar	nkruptcy, were any financial accounts	or instruments held in	Vour name, or for your	henefit
ioseu,	i, som, moved, of transfeffed?				
iclude rokom	e checking, savings, money m	arket, or other financial accounts; cert	ificates of deposit; sh	ares in banks, credit ur	nions,
iokera Ži No	age nouses, pension funds, co	ooperatives, associations, and other fi	nancial institutions.		
	s. Fill in the details.				
. 103	a i m m die details.				
		Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Narr	me of Financial Institution		,,,,,		
		XXXX	Checking		\$
Num	mber Street		☐ Savings		
*****	**************************************	NP-1-01-5-01	Money market		
City	y State ZIP Co	de	☐ Brokerage		
			Other		
Nam	ne of Financial Institution	XXXX	☐ Checking		•
HAIT	in or randicial distillation		☐ Savings		¥
Num	nber Street	<del></del>	Money market		
		**************************************	☐ Brokerage		
<u> </u>			Other		
City	State ZIP Coo	le			
you n	now have, or did you have wit	hin 1 year before you filed for bankrup	tov anv safe denocit k	ov or other density	
Luring	es, cash, or other valuables?	,	,,,	ox or other depository	101
No					
Yes. I	Fill in the details.				
		Who else had access to it?	Describe the	contents	Do you still
					6 acc 160
					□ No
	e of Financial Institution	Name			Yes
Name					
Name Numb	ber Street	N			
	ber Street	Number Street			

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Debtor 1	Sullivan		Hollis	Case number (#known)	
	First Name	Middle Name	Last Name	Cook Harrison (i Anown)	
aa Hawa					
2. Have	; you stored pro _l No	perty in a storage	unit or place other than your home w	ithin 1 year before you filed for bankrupt	cy?
_	res. Fill in the de	tails.			
			Who else has or had access to it?	Describe the contents	Do you still
					have it?
					□ No
	Name of Storage Fa	clity	Name		Yes
	Number Street		Number Street		
			Name of the second		
	***************************************		City State ZIP Code	490-47-0	
	City	State ZIP Cod	<del>e</del>		
Part 9	identify i	Property You Ho	old or Control for Someone Else		
23. Do y	ou hold or cont	rol any property th	at someone else owns? Include any	property you borrowed from, are storing	for.
orh SZÍ≀	old in trust for s	отеопе,		•	•
	No Yes. Fill in the de	ataile			
		runs.	Where is the property?	December 45	
			where is the property?	Describe the property	Value
	Owner's Name	·	Addition to the state of the st		
					\$
	Number Street		Number Street		
	City	State ZIP Code	City State Z	P Code	
	93339				
Part 10	Give Deta	ils About Envir	onmental information		
or the	purpose of Part	10, the following d	lefinitions apply:		
≅ Envi	ronmental law m	eans any federal,	state, or local statute or regulation c	oncerning pollution, contamination, relea	ses of
naza	raous or toxic s	ubstances, wastes	s, or material into the air, land, soil, s olling the cleanup of these substanc	urface water, groundwater, or other modi	um,
utiliz	e it or used to o	on, racinty, or pro wn, operate, or uti	ретту as deтined under any environn lize it, including disposal sites.	ental law, whether you now own, operate	, or
				ardous waste, hazardous substance, toxic	_
subs	tance, hazardou	s material, polluta	nt, contaminant, or similar term.	ndous waste, nazardous substance, toxi	;
teport a	ali notices, releas	ses, and proceeding	ngs that you know about, regardless	of when they occurred	
4. Has a	iny governmenta	ıl unit notified you	that you may be liable or potentially	liable under or in violation of an environr	nental law?
ZÍ N	0				
☐ Y	es. Fill in the det	tails.			
			Governmental unit	Environmental law, if you know it	Date of notice
				, , , , , , , , , , , , , , , , , , ,	Date of Hobbe
<del></del>					
Na	ame of site	-	Governmental unit		41th Vitar minus serve annual
NE	umber Street		Number Street		
_			City State ZIP Code		
Cir			<del></del>		
Cit	F1/	Ctate 7ID Code			

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otor 1	Sullivan First Name Middle Name	Hollis	Case numbe	¥ (if known)	
	PROJECT PRINTE	ast Name			
Hav	e you notified any governmental unit	of any release of hazardous mater	rial?		
<b>I</b>		, and a manage of manage of the contract of th	ia:		
	Yes. Fill in the details.				
		Governmental unit	Environmental la	w if you know it	
			Envioraneitai la	w, it you know it	Date of notice
	Name of site		_		
	Mante Of Site	Governmental unit	-		
	Number Street	Number Street	~		
		City State ZIP Code	-		
	City State ZiP Code				
ave	you been a party in any judicial or a	dministrative proceeding under an	v environmental la	W? Include settlements and a	ordore
1	ło			and t	nucis.
<b>1</b>	es. Fill in the details.				
		Court or agency	Nature of the	1.5350	Status of the
_	No. 1 494	,	reactive of the	clase	case
·	case title	Court Name	*******		П
		Court Name			Pending
_		Number Street	<del></del>		On appea
					Conclude
C	ase number	City State ZIP Cod			
		, Jan 21 000	•		
П	Give Details About Your Bu	siness or Connections to Any	Project		
ithi	n 4 years before you filed for backey	- did	business		
	n 4 years before you filed for bankru  A sole proprietor or self-employed	in a trade profession or other and	ve any of the follo	wing connections to any busi	iness?
	A member of a limited liability com	pany (LLC) or limited liability parts	ivity, either full-tin Jarehin (1 ! 12)	ne or part-time	
	A partner in a partnership	party (cco) or miniced naturely partn	ersnip (LLP)		
	An officer, director, or managing e	xecutive of a corporation			
	An owner of at least 5% of the votil		tion		
			uon		
V	o. None of the above applies. Go to P	Part 12.			
•	es. Check all that apply above and fill				
:		Describe the nature of the business		Employer identification number	
	Business Name			Do not include Social Security nu	imber or ITIN.
-				EIN:	
1	lumber Street	Name of parameters and the			····
_		Name of accountant or bookkeeper		Dates business existed	
			:	From T-	
ć	ity State ZIP Code			From To	
		Describe the nature of the business		Employer identification number	
B	usiness Name			Do not include Social Security number or ITIN.	
N	umber Street			EIN:	
		Name of accountant or bookkeeper		Dates business existed	
-					
			í	From To	
Či	ty State ZIP Code		'		

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Debtor 1	Sullivan	Hollis	Case number (if known)
	First Name Middle Name La	ast Name	Case Harrises (ii Mown)
		Describe the nature of the business	Employer Identification number  Do not include Social Security number or ITIN.
	Business Name	·	
	Number Street	<u>.</u>	EIN:
	- Succession - Suc	Name of accountant or bookkeeper	Dates business existed
	<del></del>	_	
	City State ZIP Code	•	From To
	annalember hangen eine der dem den eine einem eine Problemet mehr ich bestricht bezieht der mehr ich der der m	The state of the s	
28. With	in 2 years before you filed for bankru	iptcy, did you give a financial statemer	nt to anyone about your business? Include all financial
	and the parties.		
 □ \	lo 'es. Fill in the details below.		
	out in the details below,		
		Date issued	
	Name	MM / DD / YYYY	
	Number Street	-	
	wanimet. Ottes		
	N		
	City State ZIP Code	•	
	City State ZIP Code		
Part 12	Sign Below		
l ha	/e read the answers on this Statemen	of Cinancial Affairs and annually	
			ents, and I declare under penalty of perjury that the caling property, or obtaining money or property by fraud
	i.S.C. §§ 152, 1341, 1519, and 3571.	result in fines up to \$250,000, or impi	isonment for up to 20 years, or both.
×	S.11 Wall.	×	
S	ignature of Debtor 1	Signature of Debtor 2	
	ate 02-13-2017	Date	
Did y	ou attach additional pages to Your S	tatement of Financial Affairs for Indivi	duals Filing for Bankruptcy (Official Form 107)?
-	No		
<b>U</b>	Yes		
Didy 52ÍN	ou pay or agree to pay someone who	is not an attorney to help you fill out I	ankruptcy forms?
			An
•	F-1001		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
			, a signature (emotion out 119),

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Debtor 1	Sullivan		Hollis	
	First Name	Middle Name	Last Name	***************************************
Debtor 2				
(Spouse, if filing	) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for	the: Northern District of II	llinois	
Case number				
(If known)				

☐ Check if this is an amended filing

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

A A COMPANY CO.			
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?	
Creditor's name: PNC Bank	☐ Surrender the property.	☑ No	
Description of	Retain the property and redeem it.	☐ Yes	
Description of 2010 Ford Edge property securing debt:	Retain the property and enter into a Reaffirmation Agreement.		
	Retain the property and [explain]:		
Creditor's name:	☐ Surrender the property.	No	
	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	- 103	
	Retain the property and [explain]:		
Creditor's name:	☐ Surrender the property.		
	Retain the property and redeem it.	Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	163	
	Retain the property and [explain]:		
Creditor's name:	☐ Surrender the property.		
	Retain the property and redeem it.	☐ Yes	
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	www ids	
	☐ Retain the property and [explain]:		

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Sullivan Hollis Debtor 1 Case number (if known) Last Name Part 2: **List Your Unexpired Personal Property Leases** For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Describe your unexpired personal property leases Will the lease be assumed? Lessor's name: ☐ No Tage Yes Description of leased property: Lessor's name: ☐ No T Yes Description of leased property: Lessor's name: □ No Description of leased ☐ Yes property: Lessor's name: ☐ No Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: Lessor's name: ☐ No ☐ Yes Description of leased property: Lessor's name: ☐ No Yes Description of leased property: Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

Signature of Debtor 2

Date O2 · 13 · 2017

MM / DD / YYYY

Date MM / DD / YYYY